

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

ADDRESS (number and street)

214 South Bronough Street

☐Check if different  
than previously  
reported. (ACC)

Tallahassee

FL

32302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005561

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Alma Gonzalez

Signature of Treasurer

Electronically Filed by Alma Gonzalez

Date

0 1

3 1

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. None of the expenditures listed on Line 30b were expressed advocacy. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M M  
1 1D D  
2 3Y Y Y Y  
2 0 1 0

To:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2010</span>		726822.32
(b) Cash on Hand at Beginning of Reporting Period .....	1299988.05	
(c) Total Receipts (from Line 19) .....	156879.64	6920417.45
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1456867.69	7647239.77
7. Total Disbursements (from Line 31) .....	380722.91	6671950.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1076144.78	975289.70
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	18541.50	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	57178.76	1664111.95
(ii) Unitemized .....	449.28	76616.58
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	57628.04	1825757.53
(b) Political Party Committees .....	0.00	1479152.92
(c) Other Political Committees (such as PACs) .....	25000.00	330656.15
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	82628.04	3635566.60
12. Transfers From Affiliated/Other Party Committees .....	73914.00	1911390.75
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	127.64	113164.32
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	165.40	1055.48
17. Other Federal Receipts (Dividends, Interest, etc.) .....	44.56	961.12
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	903279.18
(b) Levin Funds (from Schedule H5) .....	0.00	355000.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	1258279.18
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	156879.64	6920417.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	156879.64	5662138.27

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	37436.22	286007.66
(ii) Non-Federal Share.....	141070.68	1169780.06
(b) Other Federal Operating Expenditures.....	195748.92	3856478.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	374255.82	5312266.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	121526.03
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2650.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	73500.00
(ii) "Levin" Share .....	0.00	276500.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	6467.09	885507.80
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	6467.09	1235507.80
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	380722.91	6671950.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	239652.23	5225670.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	82628.04	3635566.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	82628.04	3632916.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	233185.14	4142486.18
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	127.64	113164.32
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	233057.50	4029321.86

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

ASDC/Dollars For Democrats

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35111.87

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 7 / 2 0 1 0

Transaction ID: C5657830

Amount of Each Receipt this Period

35000.00

**B.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1706.12

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 1 0

Transaction ID: C6095835

Amount of Each Receipt this Period

345.00

**C.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1706.12

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 1 0

Transaction ID: C6095837

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

35395.00

**TOTAL** This Period (last page this line number only) .....

B. Form/Schedule : **SA11AI**  
Transaction ID : **C6095835**

Credit of wire fees for November 2010



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 198

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1706.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	1	0

Transaction ID: C6095853

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Gwyndolen A. Clarke-Reed

Mailing Address 150 NE 2nd Ave

City

Deerfield Beach

State

FL

Zip Code

33441-3506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida House Representat-  
ivesOccupation  
House Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	1	0

Transaction ID: C5662222

Amount of Each Receipt this Period

2160.00

**C.**

Full Name (Last, First, Middle Initial)

DNC Services Corp

Mailing Address 430 S. Capitol St SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9848.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	1	0

Transaction ID: C5852550

Amount of Each Receipt this Period

4924.00

SUBTOTAL of Receipts This Page (optional) .....

7104.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**  
Transaction ID : **C6095853**

Credit for wire fees paid in November

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
DSP Joint Victory Fund, Florida Account

Mailing Address 430 South Capital Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17790.75

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 1 / 2 0 1 0

Transaction ID: C5910681

Amount of Each Receipt this Period

190.75

**B.**

Full Name (Last, First, Middle Initial)  
Payroll Matters

Mailing Address 2069 North Monroe Street

City State Zip Code  
Tallahassee FL 32303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2002.63

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 1 0

Transaction ID: C6095508

Amount of Each Receipt this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)  
Astra Remy-Calixte

Mailing Address 269 NW 7th St

City State Zip Code  
Miami FL 33136-3900

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Social Work

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: C5653417

Amount of Each Receipt this Period

4000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4325.75

**TOTAL** This Period (last page this line number only) .....

B. Form/Schedule : **SA11AI**  
Transaction ID : **C6095508**

Payroll 11.30 tax coming back.

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 198

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Marian Sanders

Mailing Address 3755 Dairy Road

City

Titusville

State

FL

Zip Code

32796

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Real Estate

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	1	0

Transaction ID: C5657820

Amount of Each Receipt this Period

364.00

**B.**

Full Name (Last, First, Middle Initial)

Switchboard Communications

Mailing Address 888 16th St NW  
Ste 333

City

Washington

State

DC

Zip Code

20006-4103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

10125.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	1	0

Transaction ID: C5662402

Amount of Each Receipt this Period

10125.01

SUBTOTAL of Receipts This Page (optional) .....

10489.01

TOTAL This Period (last page this line number only) .....

57313.76

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 198

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Klein for Congress Inc.

Mailing Address 21301 Powerline Road, Suite 204

City

Boca Raton

State

FL

Zip Code

33433

FEC ID number of contributing  
federal political committee.**C** C00410522

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

48000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	1	0

Transaction ID: C6095839

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional) .....

25000.00

TOTAL This Period (last page this line number only) .....

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Virginia T. Anthes

Mailing Address 570 Village Pl  
Apt 300

City State Zip Code  
Longwood FL 32779-6037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Not employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102621

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**

\*

**B.**

Full Name (Last, First, Middle Initial)

Dorothy Armstrong

Mailing Address 8470 SW 92nd Lane  
Unit C

City State Zip Code  
Ocala FL 34481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102643

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**

\*

**C.**

Full Name (Last, First, Middle Initial)

Rosemary E. Armstrong

Mailing Address 3415 W Mullen Ave

City State Zip Code  
Tampa FL 33609-4631

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102639

Amount of Each Receipt this Period

475.00

**[MEMO ITEM]**

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

John Arwood

Mailing Address 11011 NW 15 St

City

Pembroke

State

FL

Zip Code

33026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Of Miami

Occupation

Police Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 1 0

Transaction ID: C6102646

Amount of Each Receipt this Period

142.50

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Stuart Baker

Mailing Address 4188 Diplomacy Circle

City

Tallahassee

State

FL

Zip Code

32308-8719

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fsu

Occupation

Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102629

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

James Bartholomew

Mailing Address 1311 Crown Isle Cir

City

Apopka

State

FL

Zip Code

32712-2932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102615

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Stephen Bathiste

Mailing Address 3321 NW 196 Lane

City

Miami Gardens

State

FL

Zip Code

33056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 1 0

Transaction ID: C6102634

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

ALIX BAXTER

Mailing Address 2201 NW 25TH ST

City

GAINESVILLE

State

FL

Zip Code

32605-3855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Md

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102616

Amount of Each Receipt this Period

209.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Dagmar Carballo

Mailing Address 2220 Nantucker Dr

City

Sun City Center

State

FL

Zip Code

33573-7152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.50

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102630

Amount of Each Receipt this Period

142.50

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Etzer Chicoye

Mailing Address 1259 SW 172ND Ter

City

Pembroke Pnes

State

FL

Zip Code

33029-4821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102652

Amount of Each Receipt this Period

118.75

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Vonceil Coggin

Mailing Address PO Box 432

City

Chipley

State

FL

Zip Code

32428-0432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102608

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Mildred B. Cook

Mailing Address 1040 NW 6th Ter

City

Boca Raton

State

FL

Zip Code

33486-3454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coldwell Banker

Occupation  
Real Estate Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102637

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Virginia Culbert

Mailing Address 235 Chaucer Ln

City

Winter Haven

State

FL

Zip Code

33884-2339

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Polk W Board Of Cou

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

199.50

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102609

Amount of Each Receipt this Period

199.50

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Martin Davis

Mailing Address 3628 Foxwood Blvd

City

Wesley Chapel

State

FL

Zip Code

33543-5159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102623

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing  
federal political committee.

C

C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1072672.16

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 1 0

Transaction ID: C6015919

Amount of Each Receipt this Period

73914.00

**SUBTOTAL** of Receipts This Page (optional) .....

73914.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

DNC Service Corp

Mailing Address 430 S. Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27228.59

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 1 0

Transaction ID: C6102636

Amount of Each Receipt this Period

27228.59

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Doug Downer

Mailing Address 600 Lake Orienta Dr

City

Altamonte Spgs

State

FL

Zip Code

32701-6308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fiserv

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102617

Amount of Each Receipt this Period

380.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Marjorie Eisman

Mailing Address 1603 Bayhouse Point Dr # BA107

City

Sarasota

State

FL

Zip Code

34231-6769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

Transaction ID: C6102647

Amount of Each Receipt this Period

237.50

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Zlena Eneterio

Mailing Address 271 NW 156TH Ln

City

Pembroke Pnes

State

FL

Zip Code

33028-1502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dr Ronald Gelles

Occupation  
Arnp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102631

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Cecil Flemming

Mailing Address 582 SW Fairway Ave

City

Port St Lucie

State

FL

Zip Code

34983-2906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 1 0

Transaction ID: C6102653

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Rosemary Hays-Thomas

Mailing Address 7998 Lancelot Dr

City

Pensacola

State

FL

Zip Code

32514-6434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wofwest FL

Occupation  
Psychology Faculty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102622

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Bobby Henderson

Mailing Address 1580 Megan Bay Circle

City

Holly Hill

State

FL

Zip Code

32117-2045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bethune-Cookman College

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 2 / 2 0 1 0

Transaction ID: C6102635

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Susan Hoffman

Mailing Address 13603 Cozy PI

City

Tampa

State

FL

Zip Code

33625-6461

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 2 / 2 0 1 0

Transaction ID: C6102648

Amount of Each Receipt this Period

47.50

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Bradford Johnson

Mailing Address 808 Magnolia Shores Dr

City

Niceville

State

FL

Zip Code

32578-3412

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Us Air Force

Occupation  
Electronics Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102610

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Robert J. Keeler

Mailing Address 1463 Seafarer Dr

City

Osprey

State

FL

Zip Code

34229-9111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1439.25

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: C6102642

Amount of Each Receipt this Period

1439.25

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

F King

Mailing Address 6514 Aquaduct Ct

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Transaction ID: C6102607

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

F King

Mailing Address 6514 Aquaduct Ct

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102618

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

William Larson

Mailing Address 9031 SW 49TH St

City

Cooper City

State

FL

Zip Code

33328-3506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102619

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Carroll McCall

Mailing Address 2677 Blue Cypress Lake Ct

City

Cape Coral

State

FL

Zip Code

33909-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102620

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Marjorie McDonald

Mailing Address 165 Abeto Terr

City

Sebastian

State

FL

Zip Code

32958-6231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

47.50

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102624

Amount of Each Receipt this Period

47.50

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Connie C McEvoy

Mailing Address 5391 Rose Marie Ave N

City

Boynton Beach

State

FL

Zip Code

33472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102644

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Palmer McGee

Mailing Address 16521 Cypress Villa Ln

City

Fort Myers

State

FL

Zip Code

33908-7609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102632

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

William McWhorter

Mailing Address 11114 NW 38TH Ln

City

Gainesville

State

FL

Zip Code

32606-4986

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102611

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

LOUIS MERVAR

Mailing Address 6065 Verde Trl S Apt G302

City

Boca Raton

State

FL

Zip Code

33433-4416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102633

Amount of Each Receipt this Period

323.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Lois Naylor

Mailing Address 160 56TH Ave S

City

Saint Petersburg

State

FL

Zip Code

33705-5444

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102625

Amount of Each Receipt this Period

427.50

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Ann Pierson

Mailing Address 1831 NW 10th Ave

City

Gainesville

State

FL

Zip Code

32605-5311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102641

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

James Riordan

Mailing Address 7111 Wild Forest Court Apt 101

City

Naples

State

FL

Zip Code

34109-7856

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

Transaction ID: C6102649

Amount of Each Receipt this Period

23.75

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

James Riordan

Mailing Address 7111 Wild Forest Court Apt 101

City

Naples

State

FL

Zip Code

34109-7856

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 1 0

Transaction ID: C6102650

Amount of Each Receipt this Period

23.75

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Beverly Rolle

Mailing Address 4940 SW 158TH Ave

City

Miramar

State

FL

Zip Code

33027-4969

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102626

Amount of Each Receipt this Period

142.50

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Eva Rus-Biason

Mailing Address 2240 SW 23RD St

City

Miami

State

FL

Zip Code

33145-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102612

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Eva Rus-Biason

Mailing Address 2240 SW 23RD St

City

Miami

State

FL

Zip Code

33145-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102613

Amount of Each Receipt this Period

237.50

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Martin Sass

Mailing Address 704 Bridgewood Drive

City

Boca Raton

State

FL

Zip Code

33434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102645

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Bruce E. Savage

Mailing Address 2005 Chickwood Ct

City

Tampa

State

FL

Zip Code

33618-1501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
na

Occupation  
na

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

71.25

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102640

Amount of Each Receipt this Period

71.25

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Irwin Slater

Mailing Address 200 Lake Ave NE Apt 419

City

Largo

State

FL

Zip Code

33771-1655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
I.H. Slater Trust UTD

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102614

Amount of Each Receipt this Period

475.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Alfred Staggs

Mailing Address 1624 SW 28TH Ave

City

Ft Lauderdale

State

FL

Zip Code

33312-3949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102627

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Richard Swan

Mailing Address 700 Melrose Ave Apt M3

City

Winter Park

State

FL

Zip Code

32789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ Of Chicago

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.50

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102628

Amount of Each Receipt this Period

142.50

[MEMO ITEM]

\*

**B.**

Full Name (Last, First, Middle Initial)

Roy Tate

Mailing Address 3401 Seaway Dr

City

New Prt Rchy

State

FL

Zip Code

34652-8000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102651

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Judith Thomson

Mailing Address 5969 San Michelle Dr  
Same

City

Sarasota

State

FL

Zip Code

34243-2649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: C6102654

Amount of Each Receipt this Period

285.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 198

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Roger M. Wise

Mailing Address 5350 Lake Le Clare Rd

City

Lutz

State

FL

Zip Code

33558-4834

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

RETIRED CHEMIST

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

47.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

Transaction ID: C6102638

Amount of Each Receipt this Period

47.50

**[MEMO ITEM]**

\*

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

73914.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Intermedia.Net

Mailing Address 156 W. 56th St., Suite 1601

City State Zip Code  
 NY NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

148.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 0 6 / 2 0 1 0

Transaction ID: C6095858

Amount of Each Receipt this Period

148.00

**B.**

Full Name (Last, First, Middle Initial)

United States Postal Service

Mailing Address Accounting Service Center  
 2825 Lone Oak Pkwy. (3rd Floor SS)

City State Zip Code  
 Saint Paul MN 55121-9610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.40

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 1 5 / 2 0 1 0

Transaction ID: C6095877

Amount of Each Receipt this Period

17.40

**SUBTOTAL** of Receipts This Page (optional) .....

165.40

**TOTAL** This Period (last page this line number only) .....

165.40



A. Form/Schedule : **SA16**  
Transaction ID : **C6095858**

Refund of payment made on 12/2/10

B. Form/Schedule : **SA16**  
Transaction ID : **C6095877**

Refund of overpayment made December 2010.

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 198

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1706.12

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 1 0

Transaction ID: C5655223

Amount of Each Receipt this Period

24.14

**B.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1706.12

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 0 / 2 0 1 0

Transaction ID: C6095882

Amount of Each Receipt this Period

20.42

**SUBTOTAL** of Receipts This Page (optional) .....

44.56

**TOTAL** This Period (last page this line number only) .....

44.56

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Action Mail Services, Inc.	<b>Transaction ID:</b> D346622 <b>Date of Disbursement</b>																				
Mailing Address 1904 Premier Row	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Orlando State FL Zip Code 32809	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Direct Mail Candidate Name	<table border="1"> <tr> <td colspan="10">5531.93</td> </tr> </table>	5531.93																			
5531.93																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Taylor Adam	<b>Transaction ID:</b> D349870 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem Candidate Name	<table border="1"> <tr> <td colspan="10">312.50</td> </tr> </table>	312.50																			
312.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Adrabi	<b>Transaction ID:</b> D346656 <b>Date of Disbursement</b>																				
Mailing Address 1050 Brickell Ave, #2204	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Miami State FL Zip Code 33131	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising Expense Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6844.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services	<b>Transaction ID:</b> D364053 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City Phoenix State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">11.00</td> </tr> </table>	11.00																			
11.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) American Express Merchant Services	<b>Transaction ID:</b> D364057 <b>Date of Disbursement</b>																				
Mailing Address PO Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	7		2	0	1	0												
City Phoenix State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Merchant Service Fee Candidate Name	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Eric Anderson	<b>Transaction ID:</b> D349825 <b>Date of Disbursement</b>																				
Mailing Address 311 N. Federal Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33460	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem Candidate Name	<table border="1"> <tr> <td colspan="10">287.50</td> </tr> </table>	287.50																			
287.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**348.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Adrian Arnillas	<b>Transaction ID:</b> D347665 <b>Date of Disbursement</b>																				
Mailing Address 9899 NW 33rd Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">537.50</td> </tr> </table>	537.50																			
537.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) LaShawna Arnold	<b>Transaction ID:</b> D349807 <b>Date of Disbursement</b>																				
Mailing Address 5742 Fletcher St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Hollywood State FL Zip Code 33023	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">206.25</td> </tr> </table>	206.25																			
206.25																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Thais Arsolino	<b>Transaction ID:</b> D347668 <b>Date of Disbursement</b>																				
Mailing Address 2910 SW 22 Circle #E1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Delray Beach State FL Zip Code 33445	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">262.50</td> </tr> </table>	262.50																			
262.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1006.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Kelsa Auglin

Mailing Address 801 SW Ave CPL  
Apt 3

City Belle Glade State FL Zip Code 33430

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349806

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

B.

Full Name (Last, First, Middle Initial)

Emanuela Auguste

Mailing Address 801 Arthur Godfrey Rd

City Miami Beach State FL Zip Code 33140-3323

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349872

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

656.25

C.

Full Name (Last, First, Middle Initial)

Avis Rent A Car - Corporate

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement  
Auto Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D364051

Date of Disbursement

12 / 02 / 2010

Amount of Each Disbursement this Period

1.30

SUBTOTAL of Disbursements This Page (optional) .....

820.05

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Avis Rent A Car - Corporate	<b>Transaction ID:</b> D364593 <b>Date of Disbursement</b>																				
Mailing Address 6 Sylvan Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	3		2	0	1	0												
City Parsippany State NJ Zip Code 07054	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">75.00</td> </tr> </table>	75.00																			
75.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Chad Bacon	<b>Transaction ID:</b> D347669 <b>Date of Disbursement</b>																				
Mailing Address 1710 NW 3rd Ave #2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33311	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem Candidate Name	<table border="1"> <tr> <td colspan="10">537.50</td> </tr> </table>	537.50																			
537.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Arthur Bailey	<b>Transaction ID:</b> D347670 <b>Date of Disbursement</b>																				
Mailing Address 6470 NW 26th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33313	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem Candidate Name	<table border="1"> <tr> <td colspan="10">440.63</td> </tr> </table>	440.63																			
440.63																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1053.13**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Henrick Bailey

Mailing Address 6470 NW 26th Street

City Fort Lauderdale State FL Zip Code 33313

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347671

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Sadie-Ann Bailey

Mailing Address 6470 NW 26th Street

City Fort Lauderdale State FL Zip Code 33313

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347672

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

278.13

C.

Full Name (Last, First, Middle Initial)

Rupert Barnett

Mailing Address 8401 Lake Worth Rd

City Lake Worth State FL Zip Code 33467-2427

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349871

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

SUBTOTAL of Disbursements This Page (optional) .....

665.63

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Boris Bastidas

Mailing Address 1880 Florida Atlantic Blvd. Box 24

City State Zip Code  
Boca Raton FL 33431

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347673

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Alex Batista

Mailing Address 10705 NW 64th Court

City State Zip Code  
Pompano Beach FL 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347674

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Laura Batista

Mailing Address 10705 NW 64th Ct

City State Zip Code  
Pompano Beach FL 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347675

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

637.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1137.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Laura Batista

Mailing Address 10705 NW 64th Ct

City Pompano Beach State FL Zip Code 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347701

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

637.50

B.

Full Name (Last, First, Middle Initial)

Clarence Bednar

Mailing Address 5462 Mirror Lakes Blvd

City Boynton Beach State FL Zip Code 33472-1222

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349805

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

175.00

C.

Full Name (Last, First, Middle Initial)

Joan Bednar

Mailing Address 5462 Mirror Lakes Blvd

City Boynton Beach State FL Zip Code 33472-1222

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349804

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

175.00

**SUBTOTAL** of Disbursements This Page (optional) .....

987.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Travis Bejlovec

Mailing Address 524 NE 6th Street

City Pompano Beach State FL Zip Code 33060

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347729

Date of Disbursement

12 / 03 / 2010

Amount of Each Disbursement this Period

425.00

B.

Full Name (Last, First, Middle Initial)

Berkley Bell

Mailing Address 1739 Morgans Mill Cir

City Orlando State FL Zip Code 32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347523

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Tim Benitez

Mailing Address 6260 NW 76th Ct

City Parkland State FL Zip Code 33067-2432

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349817

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

462.50

SUBTOTAL of Disbursements This Page (optional) .....

1037.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Robert Benoit

Transaction ID: D349815

Date of Disbursement

11 / 30 / 2010

Mailing Address 15480 South Post Rd  
Apt 103

City Fort Lauderdale State FL Zip Code 33331

Amount of Each Disbursement this Period

450.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Joseph Berline

Transaction ID: D342363

Date of Disbursement

11 / 24 / 2010

Mailing Address 16237 N Miami Ave

City Miami State FL Zip Code 33169-6540

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

David Berry

Transaction ID: D349813

Date of Disbursement

11 / 30 / 2010

Mailing Address 1273 SE 4th Ave

City Deerfield Beach State FL Zip Code 33441

Amount of Each Disbursement this Period

37.50

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

527.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Theresa Bertram	<b>Transaction ID:</b> D349869 <b>Date of Disbursement</b>																				
Mailing Address 1824 N University Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Plantation State FL Zip Code 33322-4114	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">437.50</td> </tr> </table>	437.50																			
437.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ginetta Bethol	<b>Transaction ID:</b> D349811 <b>Date of Disbursement</b>																				
Mailing Address 106 10th Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Delray Beach State FL Zip Code 33444	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">125.00</td> </tr> </table>	125.00																			
125.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Blair	<b>Transaction ID:</b> D349810 <b>Date of Disbursement</b>																				
Mailing Address 511 SE 18th Ave.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33060	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">653.13</td> </tr> </table>	653.13																			
653.13																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1215.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross and Blue Shield of Florida

Mailing Address P.O. Box 2210

City Jacksonville State FL Zip Code 32232-5005

Purpose of Disbursement  
Benefits

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D347586

Date of Disbursement

12 / 09 / 2010

Amount of Each Disbursement this Period

4256.65

**B.** Full Name (Last, First, Middle Initial)  
Nicholas Bois

Mailing Address 2010 South Conference Dr

City Boca Raton State FL Zip Code 33486

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D349809

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

312.50

**C.** Full Name (Last, First, Middle Initial)  
Aliya Bonar

Mailing Address 702 Lakeshore Drive

City Delray Beach State FL Zip Code 33444

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D347664

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

125.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4694.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Danielle Brantley	<b>Transaction ID:</b> D347528 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Circle	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>450.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Shamonica Brantley	<b>Transaction ID:</b> D347534 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Cir	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>150.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Bighthouse Networks	<b>Transaction ID:</b> D346653 <b>Date of Disbursement</b>
Mailing Address P.O. Box 31337 10305 NW 41st St., Ste 201	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Tampa State FL Zip Code 33631	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet	<div>22.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**622.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Brighthouse Networks</p> <p>Mailing Address P.O. Box 31337 10305 NW 41st St., Ste 201</p> <p>City Tampa State FL Zip Code 33631</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D346654</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>84.95</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Rachel Broderick</p> <p>Mailing Address 528 N. Palmway</p> <p>City Lake Worth State FL Zip Code 33460</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D349820</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>587.50</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Russel Broderick</p> <p>Mailing Address 528 N Palmway</p> <p>City Lake Worth State FL Zip Code 33460</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347513</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>387.50</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1059.95**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Russell Broderick

Mailing Address 528 N Palmway

City  
Lake Worth

State  
FL

Zip Code  
33460-3125

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349819

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

387.50

B.

Full Name (Last, First, Middle Initial)

Shadae Bromfield

Mailing Address 10941 Winding Creek Ln

City  
Boca Raton

State  
FL

Zip Code  
33428-5664

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349818

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William Brookley

Mailing Address 1768 16th Avenue, North

City  
Lake Worth

State  
FL

Zip Code  
33460

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347663

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

900.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1537.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Andrew L. Brown

**Transaction ID:** D349868

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Mailing Address 13301 NW 18th Pl

Amount of Each Disbursement this Period

2	7	5	.	0	0
---	---	---	---	---	---

City	State	Zip Code
Miami	FL	33167-1528

Purpose of Disbursement  
Per Diem

Candidate Name

Category/ Type
-------------------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

**B.**

Full Name (Last, First, Middle Initial)

Brittney Brown

**Transaction ID:** D349822

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Mailing Address 709 SW 10th St

Amount of Each Disbursement this Period

3	7	.	5	0
---	---	---	---	---

City	State	Zip Code
Delray Beach	FL	33444-2219

Purpose of Disbursement  
Per Diem

Candidate Name

Category/ Type
-------------------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

**C.**

Full Name (Last, First, Middle Initial)

Tammy Brown

**Transaction ID:** D347539

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Mailing Address 1739 Morgan's Mill Circle

Amount of Each Disbursement this Period

4	5	0	.	0	0
---	---	---	---	---	---

City	State	Zip Code
Orlando	FL	32825

Purpose of Disbursement  
Per Diem

Candidate Name

Category/ Type
-------------------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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**SUBTOTAL** of Disbursements This Page (optional) .....

7	6	2	.	5	0
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**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Budwah	<b>Transaction ID:</b> D347661 <b>Date of Disbursement</b>																				
Mailing Address 4155 NW 90th Ave, Apt 106	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Pompano Beach</td> <td>State FL</td> <td>Zip Code 33065</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pompano Beach	State FL	Zip Code 33065	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00											
City Pompano Beach	State FL	Zip Code 33065																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
200.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Bungarz	<b>Transaction ID:</b> D347662 <b>Date of Disbursement</b>																				
Mailing Address 520 West County Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Bunnell</td> <td>State FL</td> <td>Zip Code 32110</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Bunnell	State FL	Zip Code 32110	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>512.50</td> </tr> </table>	512.50											
City Bunnell	State FL	Zip Code 32110																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
512.50																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Matt Burger	<b>Transaction ID:</b> D349827 <b>Date of Disbursement</b>																				
Mailing Address 221 SW 6th St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Boynton Beach</td> <td>State FL</td> <td>Zip Code 33426</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Boynton Beach	State FL	Zip Code 33426	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>37.50</td> </tr> </table>	37.50											
City Boynton Beach	State FL	Zip Code 33426																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
37.50																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**750.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Solomon Burgess, Jr

Mailing Address 2744 NW 3rd St

City  
Pompano Beach

State  
FL

Zip Code  
33069

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347660

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

690.63

B.

Full Name (Last, First, Middle Initial)

Ahmed Burton

Mailing Address 133 NW 5th Ave  
Apt 8

City  
Delray Beach

State  
FL

Zip Code  
33444-2673

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349826

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Bernard Bush

Mailing Address 9 Choctawhatchee Rd NE

City  
Fort Walton Beach

State  
FL

Zip Code  
32548-5130

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349867

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

275.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1165.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Eddie Caesar

Mailing Address 1048 Sunset Ave

City Delray Beach State FL Zip Code 33444

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349785

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

B.

Full Name (Last, First, Middle Initial)

Amanda Camacho

Mailing Address 8401 Lake Worth Rd

City Lake Worth State FL Zip Code 33467-2427

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349866

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

312.50

C.

Full Name (Last, First, Middle Initial)

Samanthia Campbell

Mailing Address 16480 S Post Rd

City Weston State FL Zip Code 33331-3562

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349823

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

675.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Giancarlo Candia

Mailing Address 7771 Blairwood Circle North

City State Zip Code  
Lake Worth FL 33467

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347650

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

362.50

B.

Full Name (Last, First, Middle Initial)

Kendra Caneo

Mailing Address 815 Indian River Street

City State Zip Code  
Boca Raton FL 33431

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347651

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

112.50

C.

Full Name (Last, First, Middle Initial)

George Cannon

Mailing Address 2832 NE 35th Street

City State Zip Code  
Fort Lauderdale FL 33306

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347656

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

312.50

SUBTOTAL of Disbursements This Page (optional) .....

787.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Hamiton Cannon

Mailing Address 2832 NE 35th Street

City State Zip Code  
Fort Lauderdale FL 33306

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347657

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

312.50

B.

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D364637

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D364061

Date of Disbursement

12 / 09 / 2010

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional) .....

352.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364062</p> <p>Date of Disbursement  <div> <div>12</div> <div>21</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>32.00</div> </p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364063</p> <p>Date of Disbursement  <div> <div>12</div> <div>21</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>30.00</div> </p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Shari Ceasar</p> <p>Mailing Address 1048 Sunset Ave</p> <p>City Delray Beach State FL Zip Code 33444-2234</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D349786</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>75.00</div> </p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**137.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Catherine Chalker

Mailing Address 1325 Haverhill Road, North

City State Zip Code  
West Palm Beach FL 33417

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347687

Date of Disbursement

12 / 20 / 2010

Amount of Each Disbursement this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Jasmine Chatfield

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349873

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

237.50

C.

Full Name (Last, First, Middle Initial)

Eimar Chavez

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349874

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

**SUBTOTAL** of Disbursements This Page (optional) .....

737.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Checkmate Consulting</p> <p>Mailing Address 3509 Connecticut Ave. NW #1075</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D349602</p> <p>Date of Disbursement 12 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 25312.09</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Michael Church</p> <p>Mailing Address 3271 NW 114th Ave</p> <p>City Pompano Beach State FL Zip Code 33076</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347649</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Christian Cintron</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City Miami Beach State FL Zip Code 33140-3323</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D349875</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 387.50</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

26049.59

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) City of Oviedo	<b>Transaction ID:</b> D346681 <b>Date of Disbursement</b>																				
Mailing Address 400 Alexandria Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Oviedo State FL Zip Code 32765	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td>211.42</td> </tr> </table>	211.42																			
211.42																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Clark	<b>Transaction ID:</b> D347515 <b>Date of Disbursement</b>																				
Mailing Address 1739 Morgans Mill Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Orlando State FL Zip Code 32825-8292	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Horace Clarke	<b>Transaction ID:</b> D349829 <b>Date of Disbursement</b>																				
Mailing Address 532 SW 9th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Belle Glade State FL Zip Code 33430-3262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>162.50</td> </tr> </table>	162.50																			
162.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**823.92**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

James Clermont

Mailing Address 332 Balsam Street

City State Zip Code  
Palm Beach Gardens FL 33410

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347646

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

B.

Full Name (Last, First, Middle Initial)

Jeff Cohen

Mailing Address 1015 Spanish River Road

City State Zip Code  
Boca Raton FL 33431

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347647

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

475.00

C.

Full Name (Last, First, Middle Initial)

Jackie Coleman

Mailing Address 82 Canterbury Drive

City State Zip Code  
West Palm Beach FL 33417

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347648

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

293.75

SUBTOTAL of Disbursements This Page (optional) .....

931.25

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Michael Coleman

Transaction ID: D349877

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Mailing Address 2605 McIntosh Drive

Amount of Each Disbursement this Period

City	State	Zip Code
Lakeland	FL	33815

87.50

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Lorraine Cornillie

Transaction ID: D347805

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Mailing Address P.O. Box 660297

Amount of Each Disbursement this Period

City	State	Zip Code
Orlando	FL	32816

360.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Harley Cornwell

Transaction ID: D347517

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Mailing Address 1739 Morgans Mill Cir

Amount of Each Disbursement this Period

City	State	Zip Code
Orlando	FL	32825-8292

450.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

897.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Jhoel Correa	<b>Transaction ID:</b> D349784 <b>Date of Disbursement</b>																				
Mailing Address 4109 Cedar Creek Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boca Raton State FL Zip Code 33487-2256	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Cameron Covington	<b>Transaction ID:</b> D347645 <b>Date of Disbursement</b>																				
Mailing Address 2583 SW 157th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Hollywood State FL Zip Code 33027	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Charles Crawford	<b>Transaction ID:</b> D347526 <b>Date of Disbursement</b>																				
Mailing Address 1739 Morgan's Mill Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Crayton

Mailing Address 1750 Eagle Trace Blvd East

City Pompano Beach State FL Zip Code 33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349799

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Ashley Cuestas

Mailing Address 10123 Cannoe Brook Circle

City Boca Raton State FL Zip Code 33498

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349800

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

C.

Full Name (Last, First, Middle Initial)

Teddy Daniels

Mailing Address 2501 Venetian Court

City Boynton Beach State FL Zip Code 33472

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349801

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

331.00

SUBTOTAL of Disbursements This Page (optional) .....

418.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Deiufort Datis	<b>Transaction ID:</b> D347642 <b>Date of Disbursement</b>																				
Mailing Address 510 East Kalmia Drive, Apt 1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City West Palm Beach</td> <td>State FL</td> <td>Zip Code 33403</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City West Palm Beach	State FL	Zip Code 33403	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>325.00</td> </tr> </table>	325.00											
City West Palm Beach	State FL	Zip Code 33403																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
325.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Marie Datis	<b>Transaction ID:</b> D347643 <b>Date of Disbursement</b>																				
Mailing Address 530 West Kalmia Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City West Palm Beach</td> <td>State FL</td> <td>Zip Code 33403</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City West Palm Beach	State FL	Zip Code 33403	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>225.00</td> </tr> </table>	225.00											
City West Palm Beach	State FL	Zip Code 33403																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
225.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Ashley Davies	<b>Transaction ID:</b> D347644 <b>Date of Disbursement</b>																				
Mailing Address 552 NW 87th Terrace	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
<table border="1"> <tr> <td>City Pompano Beach</td> <td>State FL</td> <td>Zip Code 33071</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"><input type="text"/></td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pompano Beach	State FL	Zip Code 33071	Purpose of Disbursement Per Diem		<input type="text"/>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>125.00</td> </tr> </table>	125.00											
City Pompano Beach	State FL	Zip Code 33071																			
Purpose of Disbursement Per Diem		<input type="text"/>																			
Candidate Name																					
125.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

675.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Adrian Davis	<b>Transaction ID:</b> D364064 <b>Date of Disbursement</b>																				
Mailing Address 532 SW 9th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City Belle Glade State FL Zip Code 33430-3262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">162.50</td> </tr> </table>	162.50																			
162.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Danielle Davis	<b>Transaction ID:</b> D347640 <b>Date of Disbursement</b>																				
Mailing Address 2131 NW 152 Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Opa Locka State FL Zip Code 33054	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Deon Davis	<b>Transaction ID:</b> D349879 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">162.50</td> </tr> </table>	162.50																			
162.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**725.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Claude Delmas

Mailing Address 385 NE 159th St

City  
Miami

State  
FL

Zip Code  
33162-5007

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D340243

Date of Disbursement

11 / 29 / 2010

Amount of Each Disbursement this Period

80.00

B.

Full Name (Last, First, Middle Initial)

Diane Delossantos

Mailing Address 8916 NW 40th St.

City  
Pompano Beach

State  
FL

Zip Code  
33065

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349797

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Larry Dennard

Mailing Address 11478 Silk Carnation Way

City  
Royal Palm Beach

State  
FL

Zip Code  
33411-4201

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349882

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Hans Deslume

Mailing Address 619 Minnesota Street

City  
Lake WorthState  
FLZip Code  
33462Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347612

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Stevenson Deslume

Mailing Address 271 Miner Road

City  
Boynton BeachState  
FLZip Code  
33435Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347849

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

312.50

**C.**

Full Name (Last, First, Middle Initial)

Ernest DeZavala

Mailing Address 740 Meridale Ave

City  
OrlandoState  
FLZip Code  
32803Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347806

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Amount of Each Disbursement this Period

480.00

SUBTOTAL of Disbursements This Page (optional) .....

830.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Ryan DiMaria	<b>Transaction ID:</b> D347800 <b>Date of Disbursement</b>																				
Mailing Address 10824 Heather Ridge Circle #306	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City Orlando State FL Zip Code 32817	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">620.00</td> </tr> </table>	620.00																			
620.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ty Dockins	<b>Transaction ID:</b> D346590 <b>Date of Disbursement</b>																				
Mailing Address 5241 Tulane Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	1	0												
City Jacksonville State FL Zip Code 32207	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per diem	<table border="1"> <tr> <td colspan="10">455.00</td> </tr> </table>	455.00																			
455.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Lakesha Douglas	<b>Transaction ID:</b> D347639 <b>Date of Disbursement</b>																				
Mailing Address 404 SW 2nd Street, Apt 45	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Deerfield Beach State FL Zip Code 33441	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">681.25</td> </tr> </table>	681.25																			
681.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1756.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

John Duva

Mailing Address 801 Arthur Godfrey Rd

City State Zip Code  
Miami Beach FL 33140-3323

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349880

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Mike Eberhardt

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349881

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

87.50

C.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 1 Concourse Pkwy NE  
Ste 300

City State Zip Code  
Atlanta GA 30328-5346

Purpose of Disbursement  
Merchant Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D364059

Date of Disbursement

12 / 02 / 2010

Amount of Each Disbursement this Period

526.90

SUBTOTAL of Disbursements This Page (optional) .....

839.40

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 1 Concourse Pkwy NE Ste 300</p> <p>City Atlanta State GA Zip Code 30328-5346</p> <p>Purpose of Disbursement Merchant Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364049</p> <p>Date of Disbursement 12 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 1 Concourse Pkwy NE Ste 300</p> <p>City Atlanta State GA Zip Code 30328-5346</p> <p>Purpose of Disbursement Merchant Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364050</p> <p>Date of Disbursement 12 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 27.15</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Tamisha Everett</p> <p>Mailing Address 2541 NW 152nd Terrace</p> <p>City Opa Locka State FL Zip Code 33054</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347636</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 187.50</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

244.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Dominic Fabres	<b>Transaction ID:</b> D347637 <b>Date of Disbursement</b>																				
Mailing Address 515 Santander Ave, Apt 2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Miami State FL Zip Code 33134	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>4</td><td>7</td><td>8</td><td>.</td><td>1</td><td>3</td> </tr> </table>	4	7	8	.	1	3														
4	7	8	.	1	3																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Brad Fair	<b>Transaction ID:</b> D349798 <b>Date of Disbursement</b>																				
Mailing Address 6895 Fountain Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33407	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>2</td><td>8</td><td>7</td><td>.</td><td>5</td><td>0</td> </tr> </table>	2	8	7	.	5	0														
2	8	7	.	5	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Farrington	<b>Transaction ID:</b> D341492 <b>Date of Disbursement</b>																				
Mailing Address 1001 NW 140th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Miami State FL Zip Code 33168-6715	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>8</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	8	0	.	0	0															
8	0	.	0	0																	
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**845.63**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Wood Faugue

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349878

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Trevor Feagin

Mailing Address 9416 NW 54th Street

City State Zip Code  
Fort Lauderdale FL 33351

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347635

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Gabby Felix

Mailing Address 6750 NW 21st St

City State Zip Code  
Margate FL 33063-2116

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349792

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

112.50

SUBTOTAL of Disbursements This Page (optional) .....

1737.50

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Betshina Ferancois

Mailing Address 1240 West 37th Street

City State Zip Code  
West Palm Beach FL 33404

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347630

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Andrew Ferrin

Mailing Address 17424 NW 10th Street

City State Zip Code  
Hollywood FL 33029

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347631

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

687.50

C.

Full Name (Last, First, Middle Initial)

Florida Power & Light Company

Mailing Address PO Box 025576

City State Zip Code  
Miami FL 33102-5576

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D346597

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

94.29

SUBTOTAL of Disbursements This Page (optional) .....

1006.79

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Clayton Flotz

Mailing Address 12265 NW 7th Dr

City Pompano Beach State FL Zip Code 33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347632

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

268.75

B.

Full Name (Last, First, Middle Initial)

Frank Forque

Mailing Address 123 N 24th Ave  
North Unit

City Hollywood State FL Zip Code 33020-6602

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349794

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Claudia Francis

Mailing Address 823 Wilcox Drive

City West Palm Beach State FL Zip Code 33404

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347629

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

218.75

SUBTOTAL of Disbursements This Page (optional) .....

612.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Patrick Francis

Mailing Address 1017 Buchanan St

City  
Hollywood

State  
FL

Zip Code  
33019-1106

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D344433

Date of Disbursement

12 / 01 / 2010

Amount of Each Disbursement this Period

720.00

B.

Full Name (Last, First, Middle Initial)

Jermaine Frazier

Mailing Address 130 SW 11th Ave.

City  
Delray Beach

State  
FL

Zip Code  
33444

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349846

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

C.

Full Name (Last, First, Middle Initial)

Ryan Frazier

Mailing Address 515 NE 25th Ave

City  
Boynton Beach

State  
FL

Zip Code  
33435

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347725

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

737.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1495.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Bernard Freedman

Mailing Address 10584 Royal Carribbean Cir

City State Zip Code  
Boynton Beach FL 33437

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Nelson Fridline

Mailing Address 635 Australian Circle

City State Zip Code  
West Palm Beach FL 33403

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347728

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Douglas Fuller

Mailing Address 735 NW 126th Ave

City State Zip Code  
Pompano Beach FL 33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

825.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony Fullerton	<b>Transaction ID:</b> D347538 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>450.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Velita Fullerton	<b>Transaction ID:</b> D347540 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>150.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Maya Gabriel	<b>Transaction ID:</b> D347714 <b>Date of Disbursement</b>
Mailing Address 12310 Royal Palm Blvd.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Pompano Beach State FL Zip Code 33065	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>525.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Enrique Gago

Mailing Address 4334 NW 9th Ave #113

City Pompano Beach State FL Zip Code 33064

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347715

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Valerie Galeano

Mailing Address 2538 NW 92 Ave

City Pompano Beach State FL Zip Code 33065

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349831

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Lizza Galloway

Mailing Address 9106 A SW 22nd Street

City Boca Raton State FL Zip Code 33428

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347634

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

112.50

**SUBTOTAL** of Disbursements This Page (optional) .....

537.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Dana George	<b>Transaction ID:</b> D349890 <b>Date of Disbursement</b>																				
Mailing Address 1824 N University Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Plantation State FL Zip Code 33322-4114	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Rose Giachette	<b>Transaction ID:</b> D347789 <b>Date of Disbursement</b>																				
Mailing Address 823 Wilcox Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	1	0												
City West Palm Beach State FL Zip Code 33403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">137.50</td> </tr> </table>	137.50																			
137.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Willie Gilliard	<b>Transaction ID:</b> D347585 <b>Date of Disbursement</b>																				
Mailing Address 2711 NW 21st St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33311-3309	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1450.00</td> </tr> </table>	1450.00																			
1450.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1637.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Chevin Gillon

Mailing Address 630 SW 14th Street

City State Zip Code  
Deerfield Beach FL 33441

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347716

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

462.50

B.

Full Name (Last, First, Middle Initial)

Randi Glickman

Mailing Address 9986 Hollyhill Dr.

City State Zip Code  
Boynton Beach FL 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349832

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Donald Godfrey

Mailing Address 504 W Perry Street

City State Zip Code  
Lake Worth FL 33462

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347717

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

412.50

SUBTOTAL of Disbursements This Page (optional) .....

1025.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Spencer Goehrig	<b>Transaction ID:</b> D347718 <b>Date of Disbursement</b>																				
Mailing Address 1531 NW 109th Terrace	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33071	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">512.50</td> </tr> </table>	512.50																			
512.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Moses Gonzalez	<b>Transaction ID:</b> D349833 <b>Date of Disbursement</b>																				
Mailing Address 9197 Ramblewood Dr. Apt. 727	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33071	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">75.00</td> </tr> </table>	75.00																			
75.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Granger	<b>Transaction ID:</b> D349891 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">37.50</td> </tr> </table>	37.50																			
37.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**625.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Latoya Graves	<b>Transaction ID:</b> D349834 <b>Date of Disbursement</b>																				
Mailing Address 5885 NW 23rd St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Lauderhill FL 33313-3164	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>606.25</td> </tr> </table>	606.25																			
606.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) David Grider	<b>Transaction ID:</b> D349835 <b>Date of Disbursement</b>																				
Mailing Address 23054 Post Garden Way Apt 414	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Boca Raton FL 33433	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>37.50</td> </tr> </table>	37.50																			
37.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Grumbman	<b>Transaction ID:</b> D349836 <b>Date of Disbursement</b>																				
Mailing Address 7480 Silverwoods Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Boca Raton FL 33433	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>425.00</td> </tr> </table>	425.00																			
425.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1068.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Grump	<b>Transaction ID:</b> D347548 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 166554	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City Orlando State FL Zip Code 32816	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">580.00</td> </tr> </table>	580.00																			
580.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Gray Guerrier	<b>Transaction ID:</b> D347611 <b>Date of Disbursement</b>																				
Mailing Address 8572 Breezyhill Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boynton Beach State FL Zip Code 33473	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">37.50</td> </tr> </table>	37.50																			
37.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Nerlande Guerrier	<b>Transaction ID:</b> D347633 <b>Date of Disbursement</b>																				
Mailing Address 8572 Breezyhill Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boynton Beach State FL Zip Code 33473	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">37.50</td> </tr> </table>	37.50																			
37.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

655.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Richardine Guerrier <hr/> Mailing Address    8572 Breezy Hill Dr	<b>Transaction ID:</b> D349837 <b>Date of Disbursement</b> <div> <div>11</div> <div>30</div> <div>2010</div> </div>
<div> <div>City Boynton Beach</div> <div>State FL</div> <div>Zip Code 33473-4898</div> </div> <div> <div>Purpose of Disbursement Per Diem</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State:      District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>Category/ Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>200.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Eveling Harrell <hr/> Mailing Address    532 SW 9th St	<b>Transaction ID:</b> D349839 <b>Date of Disbursement</b> <div> <div>11</div> <div>30</div> <div>2010</div> </div>
<div> <div>City Belle Glade</div> <div>State FL</div> <div>Zip Code 33430-3262</div> </div> <div> <div>Purpose of Disbursement Per Diem</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State:      District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>Category/ Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>162.50</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Sierra Hatcher <hr/> Mailing Address    401 NW 184th Terrace	<b>Transaction ID:</b> D347658 <b>Date of Disbursement</b> <div> <div>11</div> <div>30</div> <div>2010</div> </div>
<div> <div>City Miami</div> <div>State FL</div> <div>Zip Code 33169</div> </div> <div> <div>Purpose of Disbursement Per Diem</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State:      District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>Category/ Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>150.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

512.50

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jody Hayland

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349892

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

B.

Full Name (Last, First, Middle Initial)

Ryan Hearn

Mailing Address 10937 NW 14th Street

City State Zip Code  
Pompano Beach FL 33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347719

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

900.00

C.

Full Name (Last, First, Middle Initial)

Stephanie Herra

Mailing Address 10133 NW 48th Drive

City State Zip Code  
Pompano Beach FL 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347702

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

675.00

SUBTOTAL of Disbursements This Page (optional) .....

1612.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Rodrigo Hidalgo

Transaction ID: D349840

Date of Disbursement

11 / 30 / 2010

Mailing Address 901 N Federal Hwy  
Apt 8

City Lake Worth State FL Zip Code 33460

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Lisa Hosetler

Transaction ID: D349842

Date of Disbursement

11 / 30 / 2010

Mailing Address 14625 11th Terrace

City Loxahatchee State FL Zip Code 33470

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Ashley Hunter

Transaction ID: D347529

Date of Disbursement

11 / 30 / 2010

Mailing Address 1739 Morgans Mill Cir

City Orlando State FL Zip Code 32825-8292

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Denise Hyppolite	<b>Transaction ID:</b> D347722 <b>Date of Disbursement</b>																				
Mailing Address 609 SW 79th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33068	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">431.25</td> </tr> </table>	431.25																			
431.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Intuit Software	<b>Transaction ID:</b> D347867 <b>Date of Disbursement</b>																				
Mailing Address 2632 Marine Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	1	0												
City Mountain View State CA Zip Code 94043-1126	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Admin Office Supplies	<table border="1"> <tr> <td colspan="10">185.95</td> </tr> </table>	185.95																			
185.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) William Isbel	<b>Transaction ID:</b> D349889 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">87.50</td> </tr> </table>	87.50																			
87.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**704.70**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 198

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sidney Issac

Mailing Address 6876 Sugarloaf Key Street

City State Zip Code  
Lake Worth FL 33467

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347721

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

143.75

B.

Full Name (Last, First, Middle Initial)

Kami Jackson

Mailing Address 1739 Morgans Mill Cir

City State Zip Code  
Orlando FL 32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347532

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mary Jackson

Mailing Address 1739 Morgans Mill Cir

City State Zip Code  
Orlando FL 32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347533

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

443.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Reggie Jackson	<b>Transaction ID:</b> D347535 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>150.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mitchell Jacobs	<b>Transaction ID:</b> D347703 <b>Date of Disbursement</b>
Mailing Address 651 NE 5th Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Pompano Beach State FL Zip Code 33060	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>306.25</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Emmanuella Jacques	<b>Transaction ID:</b> D347704 <b>Date of Disbursement</b>
Mailing Address 22490 SW 66th Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33428	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>100.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

556.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Julian James	<b>Transaction ID:</b> D347705 <b>Date of Disbursement</b>																				
Mailing Address 8360 NW 46th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33313	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">540.63</td> </tr> </table>	540.63																			
540.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) David Jampel	<b>Transaction ID:</b> D347707 <b>Date of Disbursement</b>																				
Mailing Address 528 N Palmway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33460	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">587.50</td> </tr> </table>	587.50																			
587.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Jimenez	<b>Transaction ID:</b> D347709 <b>Date of Disbursement</b>																				
Mailing Address 424 Forest Hill Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City West Palm Beach State FL Zip Code 33405	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">125.00</td> </tr> </table>	125.00																			
125.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1253.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Maria Jimenez

Mailing Address 9109 SW 21st Apt B

City Boca Raton State FL Zip Code 33428

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347710

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

168.75

B.

Full Name (Last, First, Middle Initial)

Alton Johnson

Mailing Address 3360 NW 6th St

City Fort Lauderdale State FL Zip Code 33311-7602

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349803

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

381.25

C.

Full Name (Last, First, Middle Initial)

Andre Johnson

Mailing Address 1739 Morgans Mill Cir

City Orlando State FL Zip Code 32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347527

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Marvin Johnson	<b>Transaction ID:</b> D347711 <b>Date of Disbursement</b>								
Mailing Address 3121 SE 9th Terrace	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>								
<table border="1"> <tr> <td>City Pompano Beach</td> <td>State FL</td> <td>Zip Code 33064</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"> <div>Category/ Type</div> </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pompano Beach	State FL	Zip Code 33064	Purpose of Disbursement Per Diem		<div>Category/ Type</div>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>43.75</div>
City Pompano Beach	State FL	Zip Code 33064							
Purpose of Disbursement Per Diem		<div>Category/ Type</div>							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
<b>B.</b> Full Name (Last, First, Middle Initial) Sean Johnson	<b>Transaction ID:</b> D347712 <b>Date of Disbursement</b>								
Mailing Address 6528 NW 58th Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>								
<table border="1"> <tr> <td>City Pompano Beach</td> <td>State FL</td> <td>Zip Code 33067</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"> <div>Category/ Type</div> </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Pompano Beach	State FL	Zip Code 33067	Purpose of Disbursement Per Diem		<div>Category/ Type</div>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>40.63</div>
City Pompano Beach	State FL	Zip Code 33067							
Purpose of Disbursement Per Diem		<div>Category/ Type</div>							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									
<b>C.</b> Full Name (Last, First, Middle Initial) Scott Johnston	<b>Transaction ID:</b> D349888 <b>Date of Disbursement</b>								
Mailing Address 1824 N University Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>								
<table border="1"> <tr> <td>City Plantation</td> <td>State FL</td> <td>Zip Code 33322-4114</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Per Diem</td> <td rowspan="2"> <div>Category/ Type</div> </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Plantation	State FL	Zip Code 33322-4114	Purpose of Disbursement Per Diem		<div>Category/ Type</div>	Candidate Name		<b>Amount of Each Disbursement this Period</b> <div>37.50</div>
City Plantation	State FL	Zip Code 33322-4114							
Purpose of Disbursement Per Diem		<div>Category/ Type</div>							
Candidate Name									
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:				
Office Sought:	Disbursement For:								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State: District:									

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**121.88**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jeanni Jules

Mailing Address 1987 Nasseau Drive

City State Zip Code  
West Palm Beach FL 33404

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347726

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Joshua Kallen

Mailing Address 13601 Columbine Ave

City State Zip Code  
Wellington FL 33414

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349824

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Joseph Kenney

Mailing Address 1 Royal Palm Way  
#106

City State Zip Code  
Boca Raton FL 33432

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349841

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

112.50

**SUBTOTAL** of Disbursements This Page (optional) .....

412.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jad Khazem

Mailing Address 8783 Sonoma Lake Blvd

City State Zip Code  
Boca Raton FL 33434

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347613

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mikhail Kogan

Mailing Address 1824 N University Dr

City State Zip Code  
Plantation FL 33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349861

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

87.50

C.

Full Name (Last, First, Middle Initial)

Gilbert Kubayanda

Mailing Address 4341 NW 19th St Apt 8

City State Zip Code  
Fort Lauderdale FL 33313

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347727

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

609.38

SUBTOTAL of Disbursements This Page (optional) .....

771.88

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Telly Law

Mailing Address 1739 Morgan's Mill Circle

City Orlando State FL Zip Code 32825

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347525

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Imeles Leger

Mailing Address 131 Rosewood Circle

City Jupiter State FL Zip Code 33458

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347667

Date of Disbursement

12 / 20 / 2010

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Glen-Daros Lemard

Mailing Address 8311 NW 59th Court

City Fort Lauderdale State FL Zip Code 33321

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347778

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

375.00

SUBTOTAL of Disbursements This Page (optional) .....

625.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Keith Lester</p> <p>Mailing Address 3626 Whitehall Drive Apt 302</p> <p>City West Palm Beach State FL Zip Code 33401</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347777</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>281.25</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) James Lewis</p> <p>Mailing Address 1325 Haverhill Road, North</p> <p>City West Palm Beach State FL Zip Code 33417</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347776</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>193.75</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Franklin Ligonde</p> <p>Mailing Address 812 Venetian Isles Drive</p> <p>City West Palm Beach State FL Zip Code 33403</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347760</p> <p>Date of Disbursement  <div> <div>11</div> <div>30</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>425.00</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**900.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sai Lo

Mailing Address 22380 NW 39th Court

City  
Pompano Beach

State  
FL

Zip Code  
33065

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347759

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Krista Loeper

Mailing Address 1824 N University Dr

City  
Plantation

State  
FL

Zip Code  
33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349862

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Pam Loewenstein

Mailing Address 4 Anglican Lane

City  
Lincolnshire

State  
IL

Zip Code  
60069

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347821

Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

725.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Skarlett Lopez	<b>Transaction ID:</b> D347758 <b>Date of Disbursement</b>
Mailing Address 2509 NW 23rd Street	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Boynton Beach State FL Zip Code 34336	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>325.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LSG Strategies	<b>Transaction ID:</b> D342924 <b>Date of Disbursement</b>
Mailing Address 2120 L St NW Ste 305	<div> <div>11</div> <div>29</div> <div>2010</div> </div>
City Washington State DC Zip Code 20037-1563	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consulting/Communications	<div>2639.43</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Julissa Malki	<b>Transaction ID:</b> D349849 <b>Date of Disbursement</b>
Mailing Address 15395 Take Off Pl	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Wellington State FL Zip Code 33414-8306	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3014.43**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Danyale Manuel

Mailing Address 6531 NW 14th Court

City State Zip Code  
Miami FL 33147

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347756

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

237.50

B.

Full Name (Last, First, Middle Initial)

D'Mitry Marin

Mailing Address 1308 Bayview Dr. #29

City State Zip Code  
Fort Lauderdale FL 33304

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347757

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

1081.25

C.

Full Name (Last, First, Middle Initial)

Jose Marrero

Mailing Address 8401 Lake Worth Rd

City State Zip Code  
Lake Worth FL 33467-2427

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349893

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1481.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Guilherme Massetti

Mailing Address 10253 Crosswind Rd

City  
Boca Raton

State  
FL

Zip Code  
33498

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347755

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

287.50

B.

Full Name (Last, First, Middle Initial)

Brandon McConico

Mailing Address 1739 Morgan's Mill Circle

City  
Orlando

State  
FL

Zip Code  
32825

Purpose of Disbursement  
Per diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347512

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Patty McCorn

Mailing Address 1824 N University Dr

City  
Plantation

State  
FL

Zip Code  
33322-4114

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349894

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

**SUBTOTAL** of Disbursements This Page (optional) .....

962.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Steven McElroy

Mailing Address 1739 Morgan's Mill Circle

City	State	Zip Code
Orlando	FL	32825

Purpose of Disbursement  
Per diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347505

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Desmond McGowan

Mailing Address 230 NW 20th Street

City	State	Zip Code
Pompano Beach	FL	33060

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347754

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

231.25

**C.**

Full Name (Last, First, Middle Initial)

Michelle McGrath

Mailing Address PO Box 8462

City	State	Zip Code
Delray Beach	FL	33482

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349850

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

275.00

SUBTOTAL of Disbursements This Page (optional) .....

656.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Brandon McNew

Mailing Address 612 Anderson Cir  
Apt 103

City State Zip Code  
Deerfield Beach FL 33441-7743

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349851

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Tracy Mierkey

Mailing Address 2697 Floral Road

City State Zip Code  
Lantana FL 33462

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347753

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)

David Millan

Mailing Address 6850 NW 2nd Ave  
Unit 2

City State Zip Code  
Boca Raton FL 33487

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349852

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

775.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Trey Miller

Mailing Address 2869 Aein Road

City  
Orlando

State  
FL

Zip Code  
32817

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347547

Date of Disbursement

12 / 20 / 2010

Amount of Each Disbursement this Period

700.00

B.

Full Name (Last, First, Middle Initial)

Nickoda Mills

Mailing Address 5101 SW 60th Street, Apt 1807

City  
Ocala

State  
FL

Zip Code  
34474

Purpose of Disbursement  
Per diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D346591

Date of Disbursement

12 / 07 / 2010

Amount of Each Disbursement this Period

520.00

C.

Full Name (Last, First, Middle Initial)

AJ Misaki

Mailing Address 1880 FAU Blvd  
Box 553 N

City  
Boca Raton

State  
FL

Zip Code  
33431

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349853

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

412.50

SUBTOTAL of Disbursements This Page (optional) .....

1632.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Mission Control

Mailing Address 114 A Mansfield Hollow Road

City Mansfield Center State CT Zip Code 06250

Purpose of Disbursement  
Direct Mail

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D346598

Date of Disbursement

12 / 03 / 2010

Amount of Each Disbursement this Period

2400.00

B.

Full Name (Last, First, Middle Initial)

Christina Montalvo

Mailing Address 5650 Pacific Blvd  
Apt 1105

City Boca Raton State FL Zip Code 33433-6797

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349843

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

350.00

C.

Full Name (Last, First, Middle Initial)

Laqueta Moreland

Mailing Address 414 SW 2nd St  
Apt 94

City Deerfield Beach State FL Zip Code 33441

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347792

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

421.88

SUBTOTAL of Disbursements This Page (optional) .....

3171.88

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 198

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Isabella Morinelli	<b>Transaction ID:</b> D349854 <b>Date of Disbursement</b>
Mailing Address 2675 NW 31 St.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33432	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>312.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Brett Mulhall	<b>Transaction ID:</b> D349898 <b>Date of Disbursement</b>
Mailing Address 1824 N University Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Plantation State FL Zip Code 33322-4114	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>281.25</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Justin Murphy	<b>Transaction ID:</b> D349856 <b>Date of Disbursement</b>
Mailing Address 33 East Camino Real Apt 904	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33432	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>325.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**918.75**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Amirah Mustapha	<b>Transaction ID:</b> D349857 <b>Date of Disbursement</b>																				
Mailing Address 9124 NW 50th Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33067	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>	150.00																			
150.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Jesse Mustapha	<b>Transaction ID:</b> D349897 <b>Date of Disbursement</b>																				
Mailing Address 1824 N University Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Plantation State FL Zip Code 33322-4114	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">262.50</td> </tr> </table>	262.50																			
262.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Francois Nerline	<b>Transaction ID:</b> D347851 <b>Date of Disbursement</b>																				
Mailing Address 530 West Kalmia Drive Apt 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	1	0												
City West Palm Beach State FL Zip Code 33403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">225.00</td> </tr> </table>	225.00																			
225.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**637.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Nesbitt Research</p> <p>Mailing Address 2120 L St NW Ste 305</p> <p>City Washington State DC Zip Code 20037-1563</p> <p>Purpose of Disbursement Consulting/Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347819</p> <p>Date of Disbursement 12 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) James Noland</p> <p>Mailing Address 14575 Bonaire Blvd, #405</p> <p>City Delray Beach State FL Zip Code 33446</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347609</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paul Notley</p> <p>Mailing Address 33 East Camino Real Apt 904</p> <p>City Boca Raton State FL Zip Code 33432</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D349858</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p> <p>Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3075.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Anne Oldham	<b>Transaction ID:</b> D346657 <b>Date of Disbursement</b>																				
Mailing Address 2918 W Coachman Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Tampa State FL Zip Code 33611-2810	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Lease/Rent	<table border="1"> <tr> <td colspan="10">221.63</td> </tr> </table>	221.63																			
221.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Bruce Oliveira	<b>Transaction ID:</b> D349896 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">387.50</td> </tr> </table>	387.50																			
387.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Hunter Ostrower	<b>Transaction ID:</b> D349895 <b>Date of Disbursement</b>																				
Mailing Address 801 Arthur Godfrey Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Miami Beach State FL Zip Code 33140-3323	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">362.50</td> </tr> </table>	362.50																			
362.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

971.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Kimberly Ostrower

Mailing Address 3401 West Hillsboro Rd

City Pompano Beach State FL Zip Code 33073

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347791

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

487.50

B.

Full Name (Last, First, Middle Initial)

Robert Ostrower

Mailing Address 4950 NW 54th Street

City Pompano Beach State FL Zip Code 33073

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347790

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Munghai Parachankhet

Mailing Address 33 E Camino Real  
Apt 904

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349780

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

462.50

SUBTOTAL of Disbursements This Page (optional) .....

1275.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Willie Partner

Mailing Address 4421 SW 27th Street

City State Zip Code  
Hollywood FL 33023

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D344401

Date of Disbursement

/   /

Amount of Each Disbursement this Period

520.00

B.

Full Name (Last, First, Middle Initial)

Melissa Perez

Mailing Address 8010 Hampton Blvd., Apt 310

City State Zip Code  
Pompano Beach FL 33068

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347779

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Salvador Perez

Mailing Address 8401 Lake Worth Rd

City State Zip Code  
Lake Worth FL 33467-2427

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349884

Date of Disbursement

/   /

Amount of Each Disbursement this Period

287.50

**SUBTOTAL** of Disbursements This Page (optional) .....

932.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sergio Perez

Mailing Address 1580 Red Pine Trail

City  
Wellington

State  
FL

Zip Code  
33414

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347785

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Matthew Pitt

Mailing Address 3101 NW 47th Terrace  
Apt 13

City  
Fort Lauderdale

State  
FL

Zip Code  
33319

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347786

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

81.25

C.

Full Name (Last, First, Middle Initial)

Ty Powell

Mailing Address 2860 NW 115th Ter

City  
Coral Springs

State  
FL

Zip Code  
33065-3438

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349787

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

**SUBTOTAL** of Disbursements This Page (optional) .....

456.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 112 / 198

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Printmeisters, Inc.

Mailing Address 10732 William Tell Dr

City  
Orlando

State  
FL

Zip Code  
32821-8764

Purpose of Disbursement  
Direct Mail

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347836

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11874.75

B.

Full Name (Last, First, Middle Initial)

Printmeisters, Inc.

Mailing Address 10732 William Tell Dr

City  
Orlando

State  
FL

Zip Code  
32821-8764

Purpose of Disbursement  
Direct Mail

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D346599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31311.00

C.

Full Name (Last, First, Middle Initial)

Progress Energy Florida

Mailing Address P.O. Box 33199

City  
St. Petersburg

State  
FL

Zip Code  
33733-8199

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D346655

Date of Disbursement

/   /

Amount of Each Disbursement this Period

214.28

**SUBTOTAL** of Disbursements This Page (optional) .....

43400.03

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 113 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Douglas R. Pugh

Mailing Address 1110 SW 15th St

City  
Boca Raton

State  
FL

Zip Code  
33486-6704

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347787

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Michael Pugh

Mailing Address 611 SE 10th Street

City  
Pompano Beach

State  
FL

Zip Code  
33060

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347788

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

468.75

C.

Full Name (Last, First, Middle Initial)

Sarah Ramnanan

Mailing Address 5928 NW 77th Ter

City  
Parkland

State  
FL

Zip Code  
33067-1104

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349791

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

425.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1493.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Ramsay	<b>Transaction ID:</b> D347610 <b>Date of Disbursement</b>																				
Mailing Address 2880 Tennis Club Dr., Apt 500	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City West Palm Beach State FL Zip Code 33417	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>650.00</td> </tr> </table>	650.00																			
650.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Ramsey	<b>Transaction ID:</b> D347700 <b>Date of Disbursement</b>																				
Mailing Address 2880 Tennis Club Dr., Apt 500	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City West Palm Beach State FL Zip Code 33417	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>650.00</td> </tr> </table>	650.00																			
650.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mike Ray	<b>Transaction ID:</b> D347752 <b>Date of Disbursement</b>																				
Mailing Address 7806 Woodsmuir Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City West Palm Beach State FL Zip Code 33412	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>175.00</td> </tr> </table>	175.00																			
175.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1475.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lisa Rich

Mailing Address 1739 Morgans Mill Cir

City  
Orlando

State  
FL

Zip Code  
32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347521

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Lucy Rich

Mailing Address 1739 Morgans Mill Cir

City  
Orlando

State  
FL

Zip Code  
32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347519

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Charity Richardson

Mailing Address 1739 Morgan's Mill Circle

City  
Orlando

State  
FL

Zip Code  
32825

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347522

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Amaneda Rivero	<b>Transaction ID:</b> D349793 <b>Date of Disbursement</b>																				
Mailing Address 1502 SE 2nd Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Cape Coral FL 33990	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">212.50</td> </tr> </table>	212.50																			
212.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Brandon Rizzo	<b>Transaction ID:</b> D347730 <b>Date of Disbursement</b>																				
Mailing Address 8100 NW 38th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Pompano Beach FL 33065	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">412.50</td> </tr> </table>	412.50																			
412.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Cedarius Robertson	<b>Transaction ID:</b> D347524 <b>Date of Disbursement</b>																				
Mailing Address 1739 Morgan's Mill Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Orlando FL 32825	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>	150.00																			
150.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**775.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Marcus Robinson	<b>Transaction ID:</b> D347520 <b>Date of Disbursement</b>
Mailing Address 1739 Morgan's Mill Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32825	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>450.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Maria A. Rodriguez	<b>Transaction ID:</b> D347732 <b>Date of Disbursement</b>
Mailing Address 879 NW 45th St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Pompano Beach State FL Zip Code 33064	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Vincent Rollo	<b>Transaction ID:</b> D349795 <b>Date of Disbursement</b>
Mailing Address 10223 Allmanda Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Palm Beach Gardens State FL Zip Code 33410	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>100.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Vinncent Rollo	<b>Transaction ID:</b> D347514 <b>Date of Disbursement</b>																				
Mailing Address 10223 Allmanda Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Palm Beach Gardens FL 33410	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Taylor Rompell	<b>Transaction ID:</b> D349796 <b>Date of Disbursement</b>																				
Mailing Address 5318 SW 26th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Cape Coral FL 33914-6626	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">112.50</td> </tr> </table>	112.50																			
112.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Rosen	<b>Transaction ID:</b> D347733 <b>Date of Disbursement</b>																				
Mailing Address 9035 NW 51st Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Pompano Beach FL 33067	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">412.50</td> </tr> </table>	412.50																			
412.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**625.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 198

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Rahmeir Ross	<b>Transaction ID:</b> D349876 <b>Date of Disbursement</b>
Mailing Address 8401 Lake Worth Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>56.25</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Ruiz	<b>Transaction ID:</b> D347734 <b>Date of Disbursement</b>
Mailing Address 830 SW 80th Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Pompano Beach State FL Zip Code 33068	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>56.25</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Vanessa Salinas	<b>Transaction ID:</b> D347735 <b>Date of Disbursement</b>
Mailing Address 1350 NE 50th Court, Apt 408	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div>
City Fort Lauderdale State FL Zip Code 33334	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>412.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Jonathan Schaefer	<b>Transaction ID:</b> D349808 <b>Date of Disbursement</b>																				
Mailing Address 8 SE 19th Ave, #1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33060	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>212.50</td> </tr> </table>	212.50																			
212.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Matthew Schwartz	<b>Transaction ID:</b> D349860 <b>Date of Disbursement</b>																				
Mailing Address 13030 SW 104th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Miami State FL Zip Code 33176-5502	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>337.50</td> </tr> </table>	337.50																			
337.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jason Scott	<b>Transaction ID:</b> D347518 <b>Date of Disbursement</b>																				
Mailing Address 1739 Morgans Mill Cir	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Orlando State FL Zip Code 32825-8292	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Caroline Sederbaum

Mailing Address 6901 Okeechobee Blv

City State Zip Code  
West Palm Beach FL 33411

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349828

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

87.50

B.

Full Name (Last, First, Middle Initial)

Mallory Senat

Mailing Address 208 Clematis St  
Ste 507

City State Zip Code  
West Palm Beach FL 33401-5547

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349821

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

543.75

C.

Full Name (Last, First, Middle Initial)

Xavior Serrano

Mailing Address 1319 West Jennings Street

City State Zip Code  
Lake Worth FL 33462

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347736

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) .....

956.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

David Sharvit

Mailing Address 960 Coral Ridge Drive, Apt 102

City Pompano Beach State FL Zip Code 33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347737

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Corey A Shearer

Mailing Address 2455 N Nob Hill Rd  
Apt 201

City Sunrise State FL Zip Code 33322-5309

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347738

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

496.88

C.

Full Name (Last, First, Middle Initial)

Dorchas Shorter

Mailing Address 1739 Morgans Mill Cir

City Orlando State FL Zip Code 32825-8292

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347531

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional) .....

1246.88

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Marc Simms	<b>Transaction ID:</b> D347739 <b>Date of Disbursement</b>																				
Mailing Address 9174 Silver Glen Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33460	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>37.50</td> </tr> </table>	37.50																			
37.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) SKD Knickerbocker	<b>Transaction ID:</b> D346680 <b>Date of Disbursement</b>																				
Mailing Address 1818 N Street, NW Suite 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	9		2	0	1	0												
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Direct Mail	<table border="1"> <tr> <td>7975.00</td> </tr> </table>	7975.00																			
7975.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Donald Lee Smith, III	<b>Transaction ID:</b> D347516 <b>Date of Disbursement</b>																				
Mailing Address 2622 NE 4th Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boynton Beach State FL Zip Code 33435	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td>412.50</td> </tr> </table>	412.50																			
412.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**8425.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Henry Smith

Mailing Address 847 Laurel Drive

City  
West Palm Beach

State  
FL

Zip Code  
33402

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Jeremy Smith

Mailing Address 220 NW 20th Street

City  
Pompano Beach

State  
FL

Zip Code  
33060

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Keona Smith

Mailing Address 840 NW 12th Ave  
Apt 1

City  
Fort Lauderdale

State  
FL

Zip Code  
33311-7193

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349859

Date of Disbursement

/   /

Amount of Each Disbursement this Period

212.50

**SUBTOTAL** of Disbursements This Page (optional) .....

737.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Lee Smith	<b>Transaction ID:</b> D349855 <b>Date of Disbursement</b>
Mailing Address 2622 NE 4th Court	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Boynton Beach State FL Zip Code 33435	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>412.50</div>
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Lois Smith	<b>Transaction ID:</b> D349812 <b>Date of Disbursement</b>
Mailing Address 122 NW 8th Ave.	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City Boynton Beach State FL Zip Code 33435	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>75.00</div>
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mysti Smith	<b>Transaction ID:</b> D349816 <b>Date of Disbursement</b>
Mailing Address 1325 Haverhill Rd N	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City West Palm Beach State FL Zip Code 33417	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>525.00</div>
Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1012.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Matt Snipe	<b>Transaction ID:</b> D349845 <b>Date of Disbursement</b>																				
Mailing Address 532 SW 9th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Belle Glade State FL Zip Code 33430-3262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Joshua Solomon	<b>Transaction ID:</b> D347741 <b>Date of Disbursement</b>																				
Mailing Address 5575 NW 119th Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33076	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) George Sortino	<b>Transaction ID:</b> D347742 <b>Date of Disbursement</b>																				
Mailing Address 211 NE 15th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33060	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">515.63</td> </tr> </table>	515.63																			
515.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

965.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jean St. Fortist

Mailing Address 530 West Kalmia Drive

City State Zip Code  
West Palm Beach FL 33404

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347751

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

337.50

B.

Full Name (Last, First, Middle Initial)

Nick Stallworth

Mailing Address 1739 Morgan's Mill Circle

City State Zip Code  
Orlando FL 32825

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347541

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Nicole Stallworth

Mailing Address 1739 Morgan's Mill Circle

City State Zip Code  
Orlando FL 32825

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347530

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

937.50

**TOTAL** This Period (last page this line number only) .....

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

11 / 30 / 2010

State:  District:

State:  District:

State:  District:

FEC Schedule B ( Form 3X) (Revised 02/2003)



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Janet Stinger	<b>Transaction ID:</b> D347627 <b>Date of Disbursement</b>
Mailing Address 1433 SE 5th Court	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City State Zip Code Deerfield Beach FL 33441	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>600.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Rafael Suarez	<b>Transaction ID:</b> D347628 <b>Date of Disbursement</b>
Mailing Address 100 Golden Isles Dr Apt 1003	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City State Zip Code Hallandale Beach FL 33009-8811	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>750.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Natasha Sully	<b>Transaction ID:</b> D349788 <b>Date of Disbursement</b>
Mailing Address 723 Ave Chaumont	<div> <div>11</div> <div>30</div> <div>2010</div> </div>
City State Zip Code Delray Beach FL 33445	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>162.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1512.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Rachel Sultman	<b>Transaction ID:</b> D347546 <b>Date of Disbursement</b>																				
Mailing Address 3737 Shawn Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	0		2	0	1	0												
City Orlando State FL Zip Code 32826	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">860.00</td> </tr> </table>	860.00																			
860.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Charles Suselune	<b>Transaction ID:</b> D349802 <b>Date of Disbursement</b>																				
Mailing Address 5181 Cedar Lake Rd Apt 1319	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boynton Beach State FL Zip Code 33437-6216	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">112.50</td> </tr> </table>	112.50																			
112.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Tandy	<b>Transaction ID:</b> D349883 <b>Date of Disbursement</b>																				
Mailing Address 8401 Lake Worth Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">325.00</td> </tr> </table>	325.00																			
325.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1297.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 131 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Eric Tegethoff

Mailing Address 3609 Dubsdread Cir

City	State	Zip Code
Orlando	FL	32804-3079

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347544

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Amount of Each Disbursement this Period

480.00

**B.**

Full Name (Last, First, Middle Initial)

Laverene Telucian

Mailing Address 133 SW 16th Ave  
Apt. 10

City	State	Zip Code
Delray Beach	FL	33444

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D349789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

87.50

**C.**

Full Name (Last, First, Middle Initial)

Kristopher Thibault

Mailing Address 2632 13th Terrace

City	State	Zip Code
Pompano Beach	FL	33064

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347624

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Amount of Each Disbursement this Period

462.50

SUBTOTAL of Disbursements This Page (optional) .....

1030.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 132 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Thomas	<b>Transaction ID:</b> D349790 <b>Date of Disbursement</b>																				
Mailing Address 3820 NW 6th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33311-6310	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">125.00</td> </tr> </table>	125.00																			
125.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Brent Toomey	<b>Transaction ID:</b> D347625 <b>Date of Disbursement</b>																				
Mailing Address 422 South K Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33460	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">118.75</td> </tr> </table>	118.75																			
118.75																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) David A. Torgerson	<b>Transaction ID:</b> D349885 <b>Date of Disbursement</b>																				
Mailing Address 309 1/2 NE 1st St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Delray Beach State FL Zip Code 33483-4519	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">87.50</td> </tr> </table>	87.50																			
87.50																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**331.25**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Craig D. Tucker

Mailing Address Gibbs Hall 631

City Tallahassee State FL Zip Code 32307

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349886

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

B.

Full Name (Last, First, Middle Initial)

Guy Tucker

Mailing Address 11655 NW 71st PL

City Pompano Beach State FL Zip Code 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349838

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Melissa Uribe

Mailing Address 4866 Messana Terrace

City Lake Worth State FL Zip Code 33463

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347623

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

462.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Anna Uzquiano

Mailing Address 4870 North Citation Dr.  
Apt 202

City Delray Beach State FL Zip Code 33445

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349782

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

275.00

**B.**

Full Name (Last, First, Middle Initial)

Anthony Van Slyke

Mailing Address 1739 Morgan's Mill Circle

City Orlando State FL Zip Code 32825

Purpose of Disbursement  
Per diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347511

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Rene Vazquez

Mailing Address 2889 NW 91st Ave

City Pompano Beach State FL Zip Code 33065

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349783

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

112.50

**SUBTOTAL** of Disbursements This Page (optional) .....

537.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 135 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Yosselet Vilbert

Mailing Address 801 Arthur Godfrey Rd

City State Zip Code  
Miami Beach FL 33140-3323

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349887

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Emmanuel Vilbrun

Mailing Address 510 East Kalmia Drive

City State Zip Code  
West Palm Beach FL 33403

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347621

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

337.50

C.

Full Name (Last, First, Middle Initial)

Roselette Vilbrun

Mailing Address 530 West Kalmia Drive

City State Zip Code  
West Palm Beach FL 33404

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347622

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

225.00

SUBTOTAL of Disbursements This Page (optional) .....

637.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Zachary Volkman

Mailing Address 4189 Coral Springs Drive

City Pompano Beach State FL Zip Code 33065

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347602

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Jarod Walters

Mailing Address 4600 SW 25th Street

City Hollywood State FL Zip Code 33023

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347601

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

206.25

C.

Full Name (Last, First, Middle Initial)

Alvin Warren

Mailing Address 632 SW Avenue C PI  
Apt 3

City Belle Glade State FL Zip Code 33430-5874

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D349779

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

SUBTOTAL of Disbursements This Page (optional) .....

418.75

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Destiny Watkins	<b>Transaction ID:</b> D349781 <b>Date of Disbursement</b>																				
Mailing Address 533 Wildwood Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code Cape Coral FL 33914	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">325.00</td> </tr> </table>	325.00																			
325.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sarah Weingarten	<b>Transaction ID:</b> D347619 <b>Date of Disbursement</b>																				
Mailing Address 130 Meadowlands Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City State Zip Code West Palm Beach FL 33411	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">43.75</td> </tr> </table>	43.75																			
43.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Weingarten Realty	<b>Transaction ID:</b> D346972 <b>Date of Disbursement</b>																				
Mailing Address 2720 E Colonial Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	3		2	0	1	0												
City State Zip Code Orlando FL 32803-5025	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Lease/Rent	<table border="1"> <tr> <td colspan="10">400.02</td> </tr> </table>	400.02																			
400.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**768.77**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Mike Weinstein

Mailing Address 10756 NW 21st Street

City  
Pompano Beach

State  
FL

Zip Code  
33071

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347620

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Eric Weiss

Mailing Address 311 N Federal Hwy  
Apt 9

City  
Lake Worth

State  
FL

Zip Code  
33460

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347603

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

212.50

C.

Full Name (Last, First, Middle Initial)

Ann Whalin

Mailing Address 3626 Whitehall Drive  
Apt 302

City  
West Palm Beach

State  
FL

Zip Code  
33401

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347820

Date of Disbursement

12 / 21 / 2010

Amount of Each Disbursement this Period

81.25

**SUBTOTAL** of Disbursements This Page (optional) .....

543.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Shantavia Whimley

Mailing Address 18451 NE 37th Ave  
Apt 117

City State Zip Code  
Opa Locka FL 33056

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347615

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Cameron White

Mailing Address 5725 NW 101 Way

City State Zip Code  
Pompano Beach FL 33076

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347616

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

487.50

C.

Full Name (Last, First, Middle Initial)

James White

Mailing Address 1325 Haverhill Road, North

City State Zip Code  
West Palm Beach FL 33417

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347617

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

193.75

SUBTOTAL of Disbursements This Page (optional) .....

931.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Michelle White

Mailing Address 504 W Perry Street

City  
Lake Worth

State  
FL

Zip Code  
33462

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347618

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

362.50

B.

Full Name (Last, First, Middle Initial)

Britney Wight-Hardae

Mailing Address 1023 Mango Drive

City  
Delray Beach

State  
FL

Zip Code  
33444

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347606

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Charletha Williams

Mailing Address 632 SW Ave C Place, Apt 3

City  
Belle Glade

State  
FL

Zip Code  
33430

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347605

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

162.50

**SUBTOTAL** of Disbursements This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lois Williams

Mailing Address 3861 NW 4th Court

City State Zip Code  
Fort Lauderdale FL 33311

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347604

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

512.50

B.

Full Name (Last, First, Middle Initial)

Mike Williams

Mailing Address P.O. Box 11826

City State Zip Code  
West Palm Beach FL 33419

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347614

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Shamal Williams

Mailing Address 10941 Winding Creek Lane

City State Zip Code  
Boca Raton FL 33428

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347608

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

337.50

SUBTOTAL of Disbursements This Page (optional) .....

975.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Donell Wilson

Mailing Address 1739 Morgan's Mill Circle

City Orlando State FL Zip Code 32825

Purpose of Disbursement  
Per diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347504

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Michael M. Wilson

Mailing Address 4739 Langdale Dr

City Orlando State FL Zip Code 32808-2081

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347545

Date of Disbursement

12 / 20 / 2010

Amount of Each Disbursement this Period

620.00

C.

Full Name (Last, First, Middle Initial)

Priscilla Wilson

Mailing Address 1350 N Dixie Highway, #38

City Boca Raton State FL Zip Code 33432

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D347607

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

37.50

SUBTOTAL of Disbursements This Page (optional) .....

1107.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Saavedra Wilson	<b>Transaction ID:</b> D349865 <b>Date of Disbursement</b>
Mailing Address 8401 Lake Worth Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 30 / 2010</div> </div>
City Lake Worth State FL Zip Code 33467-2427	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>450.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Winning Connections, Inc.	<b>Transaction ID:</b> D346690 <b>Date of Disbursement</b>
Mailing Address 317 Pennsylvania Ave., SE 2nd Floor	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>12 / 01 / 2010</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Generic Telephone Calls	<div>9368.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Woods	<b>Transaction ID:</b> D349864 <b>Date of Disbursement</b>
Mailing Address 801 Arthur Godfrey Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 30 / 2010</div> </div>
City Miami Beach State FL Zip Code 33140-3323	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Per Diem	<div>112.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

9930.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Camilo Yepes

Mailing Address 422 S K Street

City  
Lake Worth

State  
FL

Zip Code  
33460

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D347600

Date of Disbursement

11 / 30 / 2010

Amount of Each Disbursement this Period

193.75

B.

Full Name (Last, First, Middle Initial)

Mr. Carmine's Seventh Avenue

Mailing Address 1802 E 7th Ave

City  
Tampa

State  
FL

Zip Code  
33605-3808

Purpose of Disbursement  
Dinner Meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D364069

Date of Disbursement

12 / 14 / 2010

Amount of Each Disbursement this Period

101.61

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address 2425 Wyman St

City  
Dallas

State  
TX

Zip Code  
75235-2501

Purpose of Disbursement  
Air Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D364067

Date of Disbursement

12 / 14 / 2010

Amount of Each Disbursement this Period

299.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

193.75

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 198

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Subway - Corporate

Mailing Address 325 Bic Drive

City  
Milford

State  
CT

Zip Code  
06461

Purpose of Disbursement  
Lunch Meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D364068

Date of Disbursement

MM / DD / YYYY  
12 / 14 / 2010

Amount of Each Disbursement this Period

119.01

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

195748.92

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 198

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Elieth Carrillo	<b>Transaction ID:</b> D347659 <b>Date of Disbursement</b>																				
Mailing Address 9273 SW 8th St. #315	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Boca Raton State FL Zip Code 33428	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) John DeCastro	<b>Transaction ID:</b> D347641 <b>Date of Disbursement</b>																				
Mailing Address 5200 NE 14th Way Unit 408	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33334	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">468.75</td> </tr> </table>	468.75																			
468.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jacob Fagan	<b>Transaction ID:</b> D347638 <b>Date of Disbursement</b>																				
Mailing Address 5162 Lake Osborne Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	1	0												
City Lake Worth State FL Zip Code 33461	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Per Diem	<table border="1"> <tr> <td colspan="10">212.50</td> </tr> </table>	212.50																			
212.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**781.25**

**TOTAL** This Period (last page this line number only) .....

	21b		22		23		24		25		26
	27		28a		28b		28c		29	x	30b

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

900.00

750.00

1967.92

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 198

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)

Jason Lutin

Mailing Address 2540 NW 24th St.

City State Zip Code  
Boca Raton FL 33434

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D346350

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1967.92

**B.**

Full Name (Last, First, Middle Initial)

Geoffrey Robbins

Mailing Address 1322 N K Street

City State Zip Code  
Lake Worth FL 33460

Purpose of Disbursement  
Per Diem

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D347731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2067.92

**TOTAL** This Period (last page this line number only) .....

6467.09

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 149 / 198

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
 Production Resource Group

**Nature of Debt (Purpose):**  
 Audio Visual/Conference

Mailing Address 1902 Cypress Lake Dr

City	State	ZIP Code
Orlando	FL	32837-8458

Outstanding Balance Beginning This Period

18541.50

Transaction ID: D119404

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18541.50

1) **SUBTOTALS** This Period This Page (optional)..... ▶

18541.50

2) **TOTALS** This Period (last page this line number only)..... ▶

18541.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

18541.50

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 150 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
1-800-Flowers.Com

Mailing Address

1 Old Country Road, Suite 500

City State Zip Code

Carleplace NY 11514

Purpose of Disbursement:  
FlowersCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Transaction ID: D347879

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

16.69

62.79

79.48

**B. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Road #723

City State Zip Code

Tallahassee FL 32308

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346338

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

272.03

1023.36

1295.39

**C. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Road #723

City State Zip Code

Tallahassee FL 32308

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D347893

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

497.36

1871.02

2368.38

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

786.08

2957.17

3743.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Road #723

City	State	Zip Code
Tallahassee	FL	32308

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D346932

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

272.03

1023.35

1295.38

**B. Full Name (Last, First, Middle Initial)**  
Alyssa Miller

Mailing Address

900 Riggins Road #723

City	State	Zip Code
Tallahassee	FL	32308

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: D349513

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

272.03

1023.36

1295.39

**C. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

City	State	Zip Code
Parsippany	NJ	07054

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	1	0

Transaction ID: D345687

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.47

1.78

2.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

544.53

2048.49

2593.02

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 152 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

 City State Zip Code  
Parsippany NJ 07054

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: D345690

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.26		0.99		1.25

**B. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

 City State Zip Code  
Parsippany NJ 07054

 Purpose of Disbursement:  
Auto Travel
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: D345691

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.26		0.99		1.25

**C. Full Name (Last, First, Middle Initial)**  
Bella Bella

Mailing Address

123 E 5th Ave

 City State Zip Code  
Tallahassee FL 32303-6122

 Purpose of Disbursement:  
Dinner Meeting
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date M M / D D / Y Y Y Y  
1 2 / 1 6 / 2 0 1 0

Transaction ID: D347877

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.79		1229.35		1556.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
327.31		1231.33		1558.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 153 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Best Buy Corporate

Mailing Address

7601 Penn Ave S

City	State	Zip Code
Minneapolis	MN	55423-3645

Purpose of Disbursement:  
Admin Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349627

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

270.89

1019.08

1289.97

**B. Full Name (Last, First, Middle Initial)**

Blue Cross and Blue Shield of Florida

Mailing Address

P.O. Box 2210

City	State	Zip Code
Jacksonville	FL	32232-5005

Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347587

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1137.64

4279.70

5417.34

**C. Full Name (Last, First, Middle Initial)**

Blue State Digital, LLC

Mailing Address

734 15th Street, NW, Suite 1200

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement:  
Admin WebsiteCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347591

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

287.77

1082.58

1370.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1696.30

6381.36

8077.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Capital Business Center

Mailing Address

1851 S Monroe St

City	State	Zip Code
Tallahassee	FL	32301-5527

Purpose of Disbursement:  
Admin Lease/Rent
Category/  
Type
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346686

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.19

147.41

186.60

**B. Full Name (Last, First, Middle Initial)**  
Carr, Riggs, & Ingram

Mailing Address

1713 Mahan Drive

City	State	Zip Code
Tallahassee	FL	32308

Purpose of Disbursement:  
Consulting/ Accounting
Category/  
Type
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	1	0

Transaction ID: D347592

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

589.15

2216.35

2805.50

**C. Full Name (Last, First, Middle Initial)**  
Century Link

Mailing Address

P.O. Box 96064

City	State	Zip Code
Charlotte	NC	28296

Purpose of Disbursement:  
Admin Telephone
Category/  
Type
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346682

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.97

199.27

252.24

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

681.31

2563.03

3244.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

Mailing Address

P. O. Box 10302

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349504

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

188.54

803.79

992.33

**B. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

Mailing Address

P. O. Box 10302

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346914

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

681.14

2562.40

3243.54

**C. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

Mailing Address

P. O. Box 10302

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346922

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

370.68

1394.45

1765.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1240.36

4760.64

6001.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Ms. Christina Boltin

Mailing Address

P. O. Box 10302

City	State	Zip Code
Tallahassee	FL	32302

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346328

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.44		1765.12

**B. Full Name (Last, First, Middle Initial)**  
Christopher Lazo

Mailing Address

472 W. Jefferson St. Apt 318

City	State	Zip Code
Tallahassee	FL	32301

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346345

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

**C. Full Name (Last, First, Middle Initial)**  
Christopher Lazo

Mailing Address

472 W. Jefferson St. Apt 318

City	State	Zip Code
Tallahassee	FL	32301

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D346931

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
725.24		2728.24		3453.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 157 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
City of Tallahassee

Mailing Address

600 N Monroe St

City	State	Zip Code
Tallahassee	FL	32301-1262

 Purpose of Disbursement:  
Admin Utilities
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346649

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
412.36		1551.26		1963.62

**B. Full Name (Last, First, Middle Initial)**  
Comcast

Mailing Address

PO Box 105184

City	State	Zip Code
Atlanta	GA	30348-5184

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	2	/	2	0	1	0

Transaction ID: D347854

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.03		229.57		290.60

**C. Full Name (Last, First, Middle Initial)**  
Comcast

Mailing Address

PO Box 105184

City	State	Zip Code
Atlanta	GA	30348-5184

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346687

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.70		235.89		298.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
536.09		2016.72		2552.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

David Browne

## Mailing Address

417 S. Paloma Place

City State Zip Code

Tampa FL 33609

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D346934

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

97.16

365.51

462.67

**B. Full Name (Last, First, Middle Initial)**

David Browne

## Mailing Address

417 S. Paloma Place

City State Zip Code

Tampa FL 33609

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346347

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

411.80

1549.14

1960.94

**C. Full Name (Last, First, Middle Initial)**

DeltaCom1058

## Mailing Address

P.O. Box 740597

City State Zip Code

Atlanta GA 30374-0597

## Purpose of Disbursement:

Admin Telephone

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	1	0

Transaction ID: D347584

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

84.39

359.75

444.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

593.35

2274.40

2867.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 159 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Eric Jotkoff

Mailing Address

3607 Eagle Nest Court

City	State	Zip Code
Melbourne	FL	32904

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346923

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

331.94

1248.71

1580.65

**B. Full Name (Last, First, Middle Initial)**

Eric Jotkoff

Mailing Address

3607 Eagle Nest Court

City	State	Zip Code
Melbourne	FL	32904

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346329

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

331.94

1248.71

1580.65

**C. Full Name (Last, First, Middle Initial)**

Eric Jotkoff

Mailing Address

3607 Eagle Nest Court

City	State	Zip Code
Melbourne	FL	32904

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346915

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

615.00

2313.58

2928.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1278.88

4811.00

6089.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 160 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Eric Jotkoff

Mailing Address

3607 Eagle Nest Court

City	State	Zip Code
Melbourne	FL	32904

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: D349505

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.71		1580.65

**B. Full Name (Last, First, Middle Initial)**  
Everest National Insurance Company

Mailing Address

P.O. Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

 Purpose of Disbursement:  
Benefits
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346648

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.55		1190.82		1507.37

**C. Full Name (Last, First, Middle Initial)**  
Everest National Insurance Company

Mailing Address

P.O. Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

 Purpose of Disbursement:  
Benefits
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	1	0

Transaction ID: D347593

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.95		285.71		361.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
724.44		2725.24		3449.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 161 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Gabrielle Ann Arcangeli

Mailing Address

155 Whetherbine Way, West

City	State	Zip Code
Tallahassee	FL	32301

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: D349511

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

285.62

1074.49

1360.11

**B. Full Name (Last, First, Middle Initial)**  
Gabrielle Ann Arcangeli

Mailing Address

155 Whetherbine Way, West

City	State	Zip Code
Tallahassee	FL	32301

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	1	0

Transaction ID: D346920

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

520.32

1957.41

2477.73

**C. Full Name (Last, First, Middle Initial)**  
Gabrielle Ann Arcangeli

Mailing Address

155 Whetherbine Way, West

City	State	Zip Code
Tallahassee	FL	32301

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D346930

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

285.62

1074.48

1360.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1091.56

4106.38

5197.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 162 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Gabrielle Ann Arcangeli

## Mailing Address

155 Whetherbine Way, West

City State Zip Code

Tallahassee FL 32301

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 1 0

Transaction ID: D346336

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

285.62

1074.48

1360.10

**B. Full Name (Last, First, Middle Initial)**

Intermedia.Net

## Mailing Address

156 W. 56th St., Suite 1601

City State Zip Code

NY NY 10019

## Purpose of Disbursement:

Admin Internet

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 1 0

Transaction ID: D347874

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

15.54

58.46

74.00

**C. Full Name (Last, First, Middle Initial)**

Intermedia.Net

## Mailing Address

156 W. 56th St., Suite 1601

City State Zip Code

NY NY 10019

## Purpose of Disbursement:

Admin Internet

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 1 0

Transaction ID: D364056

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.73

2.74

3.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

301.89

1135.68

1437.57

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 163 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W. 56th St., Suite 1601

City	State	Zip Code
NY	NY	10019

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	1	0

Transaction ID: D347872

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

359.56

1352.64

1712.20

**B. Full Name (Last, First, Middle Initial)**  
Intermedia.Net

Mailing Address

156 W. 56th St., Suite 1601

City	State	Zip Code
NY	NY	10019

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	1	0

Transaction ID: D347873

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.54

58.46

74.00

**C. Full Name (Last, First, Middle Initial)**  
Intuit Software

Mailing Address

2632 Marine Way

City	State	Zip Code
Mountain View	CA	94043-1126

 Purpose of Disbursement:  
Admin Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	1	0

Transaction ID: D347866

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.19

72.17

91.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

394.29

1483.27

1877.56

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 164 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Jennifer Whitcomb

Mailing Address

710 13th Avenue South

City	State	Zip Code
Jacksonville Beach	FL	32250

Purpose of Disbursement:  
Printing/GraphicsCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347835

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.50

39.50

50.00

**B. Full Name (Last, First, Middle Initial)**  
John E Rogers

Mailing Address

2257 Collins Rd.

City	State	Zip Code
Cairo	GA	39828

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346933

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

114.09

429.20

543.29

**C. Full Name (Last, First, Middle Initial)**  
John E Rogers

Mailing Address

2257 Collins Rd.

City	State	Zip Code
Cairo	GA	39828

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349515

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

80.54

303.00

383.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

205.13

771.70

976.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 165 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

John E Rogers

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

2257 Collins Rd.

City State Zip Code

Cairo GA 39828

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
AdministrativeDate 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346346

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.59

265.56

336.15

**B. Full Name (Last, First, Middle Initial)**

Kyle Schulberg

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code

Miami FL 33176-1839

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
AdministrativeDate 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346348

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

308.83

1161.80

1470.63

**C. Full Name (Last, First, Middle Initial)**

Marpan Recycling

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

6020 Woodville Hwy

City State Zip Code

Tallahassee FL 32311

Purpose of Disbursement:  
Trash DisposalCategory/  
TypeActivity or Event Identifier:  
AdministrativeDate 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	1	0

Transaction ID: D349621

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.05

3.95

5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

380.47

1431.31

1811.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 166 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Marpan Recycling

Mailing Address

6020 Woodville Hwy

City	State	Zip Code
Tallahassee	FL	32311

Purpose of Disbursement:  
Trash DisposalCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
2	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347880

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.57

5.93

7.50

**B. Full Name (Last, First, Middle Initial)**

Marpan Recycling

Mailing Address

6020 Woodville Hwy

City	State	Zip Code
Tallahassee	FL	32311

Purpose of Disbursement:  
Trash DisposalCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
2	2

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349559

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.05

3.95

5.00

**C. Full Name (Last, First, Middle Initial)**

Mary Brogan Museum of Art &amp; Science

Mailing Address

350 South Duval Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Site RentalCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346685

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

107.62

404.88

512.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 167 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way, #8107

City	State	Zip Code
Tallahassee	FL	32811

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349507

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.53

1194.51

1512.04

**B. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way, #8107

City	State	Zip Code
Tallahassee	FL	32811

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346331

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.53

1194.51

1512.04

**C. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith

Mailing Address

3550 Esplanade Way, #8107

City	State	Zip Code
Tallahassee	FL	32811

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346917

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

574.78

2162.25

2737.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1209.84

4551.27

5761.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 168 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Mildred O. Smith

## Mailing Address

3550 Esplanade Way, #8107

City	State	Zip Code
Tallahassee	FL	32811

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346925

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.53

1194.53

1512.06

**B. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349506

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

610.63

2297.14

2907.77

**C. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346330

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

610.63

2297.15

2907.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1538.79

5788.82

7327.61

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 169 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M

1 2

/

D D

1 0

/

Y Y Y Y

2 0 1 0

Transaction ID: D346916

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1111.44

4181.14

5292.58

**B. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M

1 2

/

D D

1 5

/

Y Y Y Y

2 0 1 0

Transaction ID: D346924

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

610.63

2297.14

2907.77

**C. Full Name (Last, First, Middle Initial)**

NGP Software, Inc.

## Mailing Address

1225 Eye Street NW Suite 1225

City

State

Zip Code

Washington

DC

20005-3521

## Purpose of Disbursement:

Software/Compliance

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M

1 2

/

D D

1 4

/

Y Y Y Y

2 0 1 0

Transaction ID: D347581

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

157.50

592.50

750.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1879.57

7070.78

8950.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 170 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Nicholas Pellito

Mailing Address

445 Appleyard Drive #A2-5

City	State	Zip Code
Tallahassee	FL	32304

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346334

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

217.89

819.66

1037.55

**B. Full Name (Last, First, Middle Initial)**  
Nicholas Pellito

Mailing Address

445 Appleyard Drive #A2-5

City	State	Zip Code
Tallahassee	FL	32304

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346927

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

217.89

819.66

1037.55

**C. Full Name (Last, First, Middle Initial)**  
Nicholas Pellito

Mailing Address

445 Appleyard Drive #A2-5

City	State	Zip Code
Tallahassee	FL	32304

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346919

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

403.69

1518.66

1922.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

839.47

3157.98

3997.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 171 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Nicholas Pellito

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

445 Appleyard Drive #A2-5

City State Zip Code

Tallahassee FL 32304

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 12 / 30 / 2010

Transaction ID: D349509

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

**B. Full Name (Last, First, Middle Initial)**

Office Depot-Corporate

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

PO Box 633211

City State Zip Code

Cincinnati OH 45263-3211

Purpose of Disbursement:  
Admin Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 12 / 13 / 2010

Transaction ID: D347882

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.02		33.94		42.96

**C. Full Name (Last, First, Middle Initial)**

One Source Supply Center

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

5855 Green Valley Circle #206

City State Zip Code

Culver City CA 90230

Purpose of Disbursement:  
Admin Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Date 12 / 20 / 2010

Transaction ID: D347795

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
484.35		1822.09		2306.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
711.26		2675.69		3386.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 172 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Osmond Johnson Janitorial Service

Mailing Address

24131 Lake Talquin Drive

City	State	Zip Code
Tallahassee	FL	32310-4603

Purpose of Disbursement:  
Janitorial ServiceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346968

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

126.00

474.00

600.00

**B. Full Name (Last, First, Middle Initial)**  
Osmond Johnson Janitorial Service

Mailing Address

24131 Lake Talquin Drive

City	State	Zip Code
Tallahassee	FL	32310-4603

Purpose of Disbursement:  
Janitorial ServiceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347577

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**C. Full Name (Last, First, Middle Initial)**  
PAC Strategies, LLC

Mailing Address

P.O. Box 7084

City	State	Zip Code
Alexandria	VA	22307

Purpose of Disbursement:  
Consulting/ComplianceCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346689

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

315.00

1185.00

1500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

546.00

2054.00

2600.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 173 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

PAi

Mailing Address

P. O. Box 60

City	State	Zip Code
DePere	WI	54115-0060

Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347881

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.93

105.07

133.00

**B. Full Name (Last, First, Middle Initial)**

PAi

Mailing Address

P. O. Box 60

City	State	Zip Code
DePere	WI	54115-0060

Purpose of Disbursement:  
BenefitsCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349609

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.93

105.07

133.00

**C. Full Name (Last, First, Middle Initial)**

Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Payroll TaxesCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
2	3

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D345662

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

180.58

679.31

859.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

236.44

889.45

1125.89

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 174 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

 Purpose of Disbursement:  
Payroll Fees
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	1	0

Transaction ID: D345663

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.57

5.93

7.50

**B. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

 Purpose of Disbursement:  
Payroll Tax
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	1	0

Transaction ID: D345676

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1730.72

6510.80

8241.52

**C. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

 Purpose of Disbursement:  
Payroll Tax
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	1	0

Transaction ID: D346905

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2620.43

9857.81

12478.24

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4352.72

16374.54

20727.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 175 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Payroll Matters

Mailing Address

2069 North Monroe Street

City State Zip Code

Tallahassee FL 32303

Purpose of Disbursement:

Payroll Fees

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	1	0

Transaction ID: D346906

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.98

30.02

38.00

**B. Full Name (Last, First, Middle Initial)**

Payroll Matters

Mailing Address

2069 North Monroe Street

City State Zip Code

Tallahassee FL 32303

Purpose of Disbursement:

Payroll Fees

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	1	0

Transaction ID: D346911

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.55

35.95

45.50

**C. Full Name (Last, First, Middle Initial)**

Payroll Matters

Mailing Address

2069 North Monroe Street

City State Zip Code

Tallahassee FL 32303

Purpose of Disbursement:

Payroll Taxes

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D346912

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1470.22

5530.81

7001.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1487.75

5596.78

7084.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 176 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Payroll Fees

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346316

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.19		38.31		48.50

**B. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347894

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
198.08		844.46		1042.54

**C. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Payroll Fees

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347895

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.57		5.93		7.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.84		888.70		1098.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 177 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Payroll Tax

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349387

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1320.13

4966.21

6286.34

**B. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address

2069 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
Payroll Fees

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349388

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.92

33.58

42.50

**C. Full Name (Last, First, Middle Initial)**  
Penske Truck Leasing

Mailing Address

1851 S. Monroe Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349619

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.62

51.26

64.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1342.67

5051.05

6393.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 178 / 198  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Penske Truck Leasing

## Mailing Address

1851 S. Monroe Street

City State Zip Code

Tallahassee FL 32301

## Purpose of Disbursement:

Auto Travel

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 1 0

Transaction ID: D364052

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

83.42

313.82

397.24

**B. Full Name (Last, First, Middle Initial)**

PitneyBowes

## Mailing Address

P.O. Box 371896 P.O. Box 856042

City State Zip Code

Louisville KY 40285-6390

## Purpose of Disbursement:

Admin Postage

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
1 2 / 0 8 / 2 0 1 0

Transaction ID: D346644

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

46.62

175.38

222.00

**C. Full Name (Last, First, Middle Initial)**

Principal Financial Group

## Mailing Address

P. B. Box 14416 Dept. 900

City State Zip Code

Des Moines IA 50306-3416

## Purpose of Disbursement:

Benefits

Category/  
Type

## Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
1 2 / 0 9 / 2 0 1 0

Transaction ID: D347590

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

390.08

1467.46

1857.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

520.12

1956.66

2476.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 179 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Publix Super Markets, Inc.

Mailing Address

PO Box 407

City	State	Zip Code
Lakeland	FL	33802-0407

 Purpose of Disbursement:  
Admin Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	2	/	2	0	1	0

Transaction ID: D349626

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.18		45.82		58.00

**B. Full Name (Last, First, Middle Initial)**  
Purchase Power

Mailing Address

P.O. Box 371874 P.O. Box 856042

City	State	Zip Code
Pittsburgh	PA	15250

 Purpose of Disbursement:  
Admin Postage
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346683

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

**C. Full Name (Last, First, Middle Initial)**  
Ricoh Americas Corporation

Mailing Address

21146 Network Place

City	State	Zip Code
Chicago	IL	60673-1211

 Purpose of Disbursement:  
Admin Lease/Rent
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346688

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.00		850.20		1076.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
343.18		1291.02		1634.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENT FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

PAGE 180 / 198  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Roly Poly

Mailing Address

2866 N University Dr

City

State

Zip Code

Coral Springs

FL

33065-1427

Purpose of Disbursement:

Lunch Meeting

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D347869

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.21

27.14

34.35

**B. Full Name (Last, First, Middle Initial)**

Roly Poly

Mailing Address

2866 N University Dr

City

State

Zip Code

Coral Springs

FL

33065-1427

Purpose of Disbursement:

Lunch Meeting

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D349612

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.91

33.50

42.41

**C. Full Name (Last, First, Middle Initial)**

Sandler, Reiff &amp; Young P.C.

Mailing Address

300 M Street, S. E. Suite 1102

City

State

Zip Code

Washington

DC

20003

Purpose of Disbursement:

Consulting/Legal

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D346971

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

252.00

948.00

1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

268.12

1008.64

1276.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 181 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

1544 Lorimier Road

City State Zip Code

Jacksonville FL 32207

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D346926

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

961.98

3618.86

4580.84

**B. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

1544 Lorimier Road

City State Zip Code

Jacksonville FL 32207

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D346332

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

961.98

3618.86

4580.84

**C. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

1544 Lorimier Road

City State Zip Code

Jacksonville FL 32207

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: D346918

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1779.42

6694.01

8473.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3703.38

13931.73

17635.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 182 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

1544 Lorimier Road

City State Zip Code

Jacksonville FL 32207

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: D349508

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

961.98

3618.86

4580.84

**B. Full Name (Last, First, Middle Initial)**

Service Office Supply

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

PO Box 15038

City State Zip Code

Tallahassee FL 32317-5038

## Purpose of Disbursement:

Admin Office Supplies

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	1	0

Transaction ID: D346645

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.70

74.12

93.82

**C. Full Name (Last, First, Middle Initial)**

Stephen Carville

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

## Mailing Address

2401 W. Morrison Ave., Apt 2510 Burden Ln

City State Zip Code

Tampa FL 33609

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346349

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

177.28

666.90

844.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1158.96

4359.88

5518.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 183 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
T-Mobile

Mailing Address

PO Box 37380

City	State	Zip Code
Albuquerque	NM	87176-7380

 Purpose of Disbursement:  
Admin Cell Phone
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	1	0

Transaction ID: D346646

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.48		92.10		116.58

**B. Full Name (Last, First, Middle Initial)**  
Technology Services Group

Mailing Address

4979 Glen Castle Drive

City	State	Zip Code
Tallahassee	FL	32309

 Purpose of Disbursement:  
Consulting/IT
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	1	0

Transaction ID: D346732

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**C. Full Name (Last, First, Middle Initial)**  
Karen L. Thurman

Mailing Address

9067 S.W. 190th Ave., Rd.

City	State	Zip Code
Dunnellon	FL	34423

 Purpose of Disbursement:  
Salary
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	1	0

Transaction ID: D346335

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.92		2554.03		3232.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.40		6596.13		8349.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 184 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Karen L. Thurman

## Mailing Address

9067 S.W. 190th Ave., Rd.

City	State	Zip Code
Dunnellon	FL	34423

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346928

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

678.92

2554.03

3232.95

**B. Full Name (Last, First, Middle Initial)**

Karen L. Thurman

## Mailing Address

9067 S.W. 190th Ave., Rd.

City	State	Zip Code
Dunnellon	FL	34423

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349510

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

678.92

2554.03

3232.95

**C. Full Name (Last, First, Middle Initial)**

Tracy N Henderson

## Mailing Address

213 Young Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D349512

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

256.59

965.27

1221.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1614.43

6073.33

7687.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 185 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Tracy N Henderson

Mailing Address

213 Young Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346921

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

470.73

1770.83

2241.56

**B. Full Name (Last, First, Middle Initial)**  
Tracy N Henderson

Mailing Address

213 Young Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346929

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

256.59

965.27

1221.86

**C. Full Name (Last, First, Middle Initial)**  
Tracy N Henderson

Mailing Address

213 Young Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346337

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

256.59

965.27

1221.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

983.91

3701.37

4685.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 186 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
United States Post Office

Mailing Address

2700 Campus Dr

City	State	Zip Code
San Mateo	CA	94497-0001

 Purpose of Disbursement:  
Admin Shipping
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	1	0

Transaction ID: D364058

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.87

10.78

13.65

**B. Full Name (Last, First, Middle Initial)**  
United States Postal Service

Mailing Address

Accounting Service Center 2825 Lone Oak Pkwy. (3rd Floor SS)

City	State	Zip Code
Saint Paul	MN	55121-9610

 Purpose of Disbursement:  
Admin Shipping
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	1	0

Transaction ID: D349615

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.65

13.75

17.40

**C. Full Name (Last, First, Middle Initial)**  
United States Postal Service

Mailing Address

Accounting Service Center 2825 Lone Oak Pkwy. (3rd Floor SS)

City	State	Zip Code
Saint Paul	MN	55121-9610

 Purpose of Disbursement:  
Admin Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	1	0

Transaction ID: D347883

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3.65

13.75

17.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.17

38.28

48.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 187 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
United States Postal Service

Mailing Address

Accounting Service Center 2825 Lone Oak Pkwy. (3rd Floor SS)

City	State	Zip Code
Saint Paul	MN	55121-9610

Purpose of Disbursement:  
Admin ShippingCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347884

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

**B. Full Name (Last, First, Middle Initial)**  
UPS

Mailing Address

PO Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:  
Admin ShippingCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	1

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346684

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.06		252.25		319.31

**C. Full Name (Last, First, Middle Initial)**  
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City	State	Zip Code
Bentonville	AR	72716-6209

Purpose of Disbursement:  
Admin Office SuppliesCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D347878

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.45		39.29		49.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.16		305.29		386.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 188 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

 Purpose of Disbursement:  
Admin Office Supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date  M  M /  D  D /  Y  Y  Y  Y  
1 1 / 3 0 / 2 0 1 0

Transaction ID: D345630

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.97

25.44

31.41

**B. Full Name (Last, First, Middle Initial)**  
WebDomains4u.com

Mailing Address

14455 North Hayden Rd., Suite 219

City

State

Zip Code

Scottsdale

AZ

85260

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date  M  M /  D  D /  Y  Y  Y  Y  
1 2 / 2 0 / 2 0 1 0

Transaction ID: D364054

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.14

8.03

10.17

**C. Full Name (Last, First, Middle Initial)**  
WebDomains4u.com

Mailing Address

14455 North Hayden Rd., Suite 219

City

State

Zip Code

Scottsdale

AZ

85260

 Purpose of Disbursement:  
Admin Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

 Date  M  M /  D  D /  Y  Y  Y  Y  
1 2 / 2 1 / 2 0 1 0

Transaction ID: D364055

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.27

16.07

20.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

12.38

49.54

61.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 189 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Mailing Address

1544 Lorimer Road

City	State	Zip Code
Jacksonville	FL	32207

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346572

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

207.04

778.88

985.92

**B. Full Name (Last, First, Middle Initial)**

Polos on Park

## Mailing Address

2626 Park Ave

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
LodgingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346573

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

207.04

778.88

985.92

**C. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	3

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346575

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

395.00

500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

312.04

1173.88

1485.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENT FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

PAGE 190 / 198  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 Blue Cross and Blue Shield of Florida

Mailing Address  
 P.O. Box 2210

City State Zip Code  
 Jacksonville FL 32232-5005

Purpose of Disbursement:  
 Benefits

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
 1 2 / 0 3 / 2 0 1 0

Transaction ID: D346576

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**B. Full Name (Last, First, Middle Initial)**  
 Kyle Schulberg

Mailing Address  
 9886 N Kendall Dr Apt H113

City State Zip Code  
 Miami FL 33176-1839

Purpose of Disbursement:  
 Staff Reimbursement

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
 1 1 / 3 0 / 2 0 1 0

Transaction ID: D346691

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.37

84.17

106.54

**C. Full Name (Last, First, Middle Initial)**  
 AT&T Mobility

Mailing Address  
 PO Box 538695

City State Zip Code  
 Atlanta GA 30353-8695

Purpose of Disbursement:  
 Admin Cell Phone

Category/Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date M M / D D / Y Y Y Y  
 1 1 / 3 0 / 2 0 1 0

Transaction ID: D346692

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.37

84.17

106.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.37

84.17

106.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 191 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Eric Jotkoff

Mailing Address

3607 Eagle Nest Court

City	State	Zip Code
Melbourne	FL	32904

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346698

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.81		123.42		156.23

**B. Full Name (Last, First, Middle Initial)**  
Papa John's Pizza

Mailing Address

P. O. Box 4209

City	State	Zip Code
Tallahassee	FL	32315

Purpose of Disbursement:  
Lunch MeetingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346699

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.81		123.42		156.23

**C. Full Name (Last, First, Middle Initial)**  
Christopher Lazo

Mailing Address

472 W. Jefferson St. Apt 318

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	3

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D346969

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.72		156.94		198.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.53		280.36		354.89

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 192 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Shell Gas - Corporate

Mailing Address

P.O. Box 2463

City State Zip Code

Houston TX 77252

Purpose of Disbursement:

Auto Travel

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date   /   /    

Transaction ID: D346970

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

41.72

156.94

198.66

**B. Full Name (Last, First, Middle Initial)**

Ms. Christina Boltin

Mailing Address

P. O. Box 10302

City State Zip Code

Tallahassee FL 32302

Purpose of Disbursement:

Staff Reimbursement

Category/  
Type

Activity or Event Identifier:

Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date   /   /    

Transaction ID: D346973

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.20

94.80

120.00

**C. Full Name (Last, First, Middle Initial)**

AT&amp;T Mobility

Mailing Address

PO Box 538695

City State Zip Code

Atlanta GA 30353-8695

Purpose of Disbursement:

Admin Cell Phone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date   /   /    

Transaction ID: D346974

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.20

94.80

120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.20

94.80

120.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 193 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Karen L. Thurman

## Mailing Address

9067 S.W. 190th Ave., Rd.

City State Zip Code

Dunnellon FL 34423

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D347579

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

252.00

948.00

1200.00

**B. Full Name (Last, First, Middle Initial)**

Doverree Properties, LLC

## Mailing Address

Attn: Mr. Leonard Pepper 310 W. Jefferson St.

City State Zip Code

Tallahassee FL 32301-1419

Purpose of Disbursement:  
LodgingCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D347580

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

252.00

948.00

1200.00

**C. Full Name (Last, First, Middle Initial)**

Scott Arceneaux

## Mailing Address

1544 Lorimier Road

City State Zip Code

Jacksonville FL 32207

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	1	0

Transaction ID: D347793

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

31.15

117.17

148.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

283.15

1065.17

1348.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 194 / 198

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

AT&amp;T Mobility

Mailing Address

PO Box 538695

City

State

Zip Code

Atlanta

GA

30353-8695

Purpose of Disbursement:

Admin Cell Phone

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y

1 2 / 2 0 / 2 0 1 0

Transaction ID: D347794

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

31.15

117.17

148.32

**B. Full Name (Last, First, Middle Initial)**

Christopher Lazo

Mailing Address

472 W. Jefferson St. Apt 318

City

State

Zip Code

Tallahassee

FL

32301

Purpose of Disbursement:

Staff Reimbursement

Category/  
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y

1 2 / 1 5 / 2 0 1 0

Transaction ID: D347831

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.84

14.46

18.30

**C. Full Name (Last, First, Middle Initial)**

United States Postal Service

Mailing Address

Accounting Service Center 2825 Lone Oak Pkwy. (3rd Floor SS)

City

State

Zip Code

Saint Paul

MN

55121-9610

Purpose of Disbursement:

Admin Shipping

Category/  
Type

Activity or Event Identifier:

Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date

M M / D D / Y Y Y Y

1 2 / 1 5 / 2 0 1 0

Transaction ID: D347832

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.84

14.46

18.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.84

14.46

18.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 195 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D347833

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

145.15

546.05

691.20

**B. Full Name (Last, First, Middle Initial)**

Ms. Anne O Morgan

## Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

Purpose of Disbursement:  
Auto TravelCategory/  
TypeActivity or Event Identifier:  
Administrative**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	1	0

Transaction ID: D347834

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

145.15

546.05

691.20

**C. Full Name (Last, First, Middle Initial)**

Eric Jotkoff

## Mailing Address

3607 Eagle Nest Court

City

State

Zip Code

Melbourne

FL

32904

Purpose of Disbursement:  
Staff ReimbursementCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	1	0

Transaction ID: D364065

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

151.53

570.02

721.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

296.68

1116.07

1412.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 196 / 198  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
 7-Eleven Corporate

Mailing Address

2711 North Haskell

City	State	Zip Code
Dallas	TX	75204

Purpose of Disbursement:  
 Lunch Meeting

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	4

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D364070

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.46

6.21

7.67

**B. Full Name (Last, First, Middle Initial)**  
 Comfort Inn Corporate

Mailing Address

10750 Columbia Pike

City	State	Zip Code
Silver Spring	MD	20901-4402

Purpose of Disbursement:  
 Travel/Lodging

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	4

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D364072

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.31

87.68

110.99

**C. Full Name (Last, First, Middle Initial)**  
 E-Z Rent-A-Car

Mailing Address

Orlando International Airport 7900 Conway Rd.

City	State	Zip Code
Orlando	FL	32827

Purpose of Disbursement:  
 Auto Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Date 

M	M
1	2

 / 

D	D
1	4

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D364071

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.47

39.40

49.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 197 / 198  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Tampa Airport Parking

Mailing Address

5503 W. Spruce Street

City

State

Zip Code

Tampa

FL

33607

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1261661.21

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date   /   /

Transaction ID: D364066

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.93

26.07

33.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

37436.22

141070.68

178506.90

**SCHEDULE L (FEC Form 3X)**

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**AGGREGATION PAGE: LEVIN FUNDS**Transaction ID: **SchedL1**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT  
NF expenses

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	6437.91	6437.91
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	6437.91	6437.91
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	6437.91	6437.91